

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

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

ADDRESS (number and street)

320 FIRST STREET SE

Check if different than previously reported. (ACC)

WASHINGTON

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00075820

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

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

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

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

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

Type or Print Name of Treasurer Keith A. Davis

Signature of Treasurer Keith A. Davis

[Electronically Filed] Date

[MM] / [DD] / [YYYY] 04 / 16 / 2014

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		21037187.37
(b) Cash on Hand at Beginning of Reporting Period.....	24002327.03	
(c) Total Receipts (from Line 19)	5128556.80	11260260.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29130883.83	32297447.50
7. Total Disbursements (from Line 31).....	4357647.73	7524211.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	24773236.10	24773236.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1689506.00	2390985.00
(ii) Unitemized	1399275.25	2605636.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3088781.25	4996621.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1318750.00	5139699.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4407531.25	10136320.22
12. Transfers From Affiliated/Other Party Committees.....	658304.97	1007598.35
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).....	10116.01	13736.99
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	52604.57	102604.57
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))..... ▶	5128556.80	11260260.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5128556.80	11260260.13

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	2762056.73	5157676.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2762056.73	5157676.04
22. Transfers to Affiliated/Other Party Committees.....	165000.00	370000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditures (use Schedule E)	1422066.00	1966311.56
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(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)).....	5000.00	5000.00
29. Other Disbursements	3525.00	15223.80
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4357647.73	7524211.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4357647.73	7524211.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4407531.25	10136320.22
34. Total Contribution Refunds (from Line 28(d))	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4402531.25	10131320.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2762056.73	5157676.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	10116.01	13736.99
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2751940.72	5143939.05

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

All payments reported on Line 21b are operating and administrative payments solely benefiting and on behalf of the National Republican Congressional Committee. As such, they are not made on behalf of any specifically identified federal candidates, nor do they constitute public communications or voter drive activity containing express advocacy. Therefore, these disbursements are correctly reported on Schedule B for Line 21b, and do not require a Schedule B, Schedule E, or Schedule F for lines 23, 24 or 25. The Committee has reviewed all reimbursements for travel and subsistence and confirms all itemized memos are reported on Line 21b pursuant to the Commission regulations. The interest rate for the Committee's Line of Credit is LIBOR + 1.75%. The Commission's software specifications do not permit text in the interest rate fields on Schedule C.

Form/Schedule:
Transaction ID:

**SCHEDULE A (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 637
<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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. CARRIE AARON
Full Name (Last, First, Middle Initial)
Mailing Address 4832 E EXETER BLVD
City PHOENIX State AZ Zip Code 85018-2950
FEC ID number of contributing federal political committee. **C**
Name of Employer MCA FINANCIAL GROUP Occupation PROJECT MANAGER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**
Date of Receipt **02 / 20 / 2014**
Transaction ID : SA11.15368014
Amount of Each Receipt this Period **500.00**
CONTRIBUTION

B. MR. DAVID H. ABBOTT
Full Name (Last, First, Middle Initial)
Mailing Address 24-61 SADDLEWOOD CT
City LANARK State IL Zip Code 61046-9652
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.00**
Date of Receipt **02 / 18 / 2014**
Transaction ID : SA11.15367556
Amount of Each Receipt this Period **125.00**
CONTRIBUTION

C. MR. DAVID H. ABBOTT
Full Name (Last, First, Middle Initial)
Mailing Address 24-61 SADDLEWOOD CT
City LANARK State IL Zip Code 61046-9652
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.00**
Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15370321
Amount of Each Receipt this Period **120.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **745.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. RUTH ABENDROTH
Full Name (Last, First, Middle Initial)

Mailing Address 11300 WARNER AVE APT C220

City FOUNTAIN VALLEY	State CA	Zip Code 92708-4137
-------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15383799

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. MS. MARGARET ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 8240 HEALY DR

City MOBILE	State AL	Zip Code 36695-4919
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15376474

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C. MRS. NORMAN AGIN
Full Name (Last, First, Middle Initial)

Mailing Address 11 HEADWATERS RD

City BLUFFTON	State SC	Zip Code 29910-8373
------------------	-------------	------------------------

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

Name of Employer AGIN INS.	Occupation INSURANCE
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	21	/	2014

Transaction ID : SA11.15367893

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. COL. JACK R. ALBRECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 5607 MILITARY CT
 City State Zip Code
 FAIRFIELD CA 94533-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15347320
 Amount of Each Receipt this Period
 105.00
 CONTRIBUTION

B. COL. JACK R. ALBRECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 5607 MILITARY CT
 City State Zip Code
 FAIRFIELD CA 94533-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371100
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

C. FRED ALDRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 COLLEGE AVE.
 City State Zip Code
 HAVERFORD PA 19041-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373372
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 505.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. FRED ALKEMA

Mailing Address 5431 WEST SUNNYVIEW AVENUE

City	State	Zip Code
VISALIA	CA	93291-9035

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361674

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. ANDRIA ALLEN

Mailing Address P.O. BOX 73

City	State	Zip Code
SOUTH LANCASTER	MA	01561-0073

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

Name of Employer	Occupation
NYPRO, INC	LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345652

Amount of Each Receipt this Period
155.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. ANDRIA ALLEN

Mailing Address P.O. BOX 73

City	State	Zip Code
SOUTH LANCASTER	MA	01561-0073

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

Name of Employer	Occupation
NYPRO, INC	LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366666

Amount of Each Receipt this Period
155.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	560.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. STANLEY W. ALLEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 19TH STREET SE
 APARTMENT 302
 City WATERTOWN State SD Zip Code 57201-3972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15370170
 Amount of Each Receipt this Period 120.00
 CONTRIBUTION

B. MR. STANLEY W. ALLEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 19TH STREET SE
 APARTMENT 302
 City WATERTOWN State SD Zip Code 57201-3972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374393
 Amount of Each Receipt this Period 120.00
 CONTRIBUTION

C. DR. ROBERT E. ALMQUIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 4527 MAGNOLIA BRIDGE RD
 City CHARLOTTE State NC Zip Code 28210-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARMEL FAMILY PHYSICIANS Occupation FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15379874
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 740.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 12 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GERARD M. ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 191 ORCHARD HILLS COURT
 City State Zip Code
 ANN ARBOR MI 48104-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DTE ENERGY COMPANY PRESIDENT AND COO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359886
 Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. KATHLEEN QUINN ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 OAKSHIRE WAY
 City State Zip Code
 PITTSFORD NY 14534-2564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381184
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MS. MARIANN H. APPLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 COMMONWEALTH AVE APT 15A
 City State Zip Code
 BOSTON MA 02116-3159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED ARTIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345230
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. JOHN R. AREND		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15337520
Mailing Address 1887 E. 71ST		Amount of Each Receipt this Period 700.00
City TULSA	State OK	Zip Code 74136-3922
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INTER CHEM	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) B. MR. CHARLES B. ARMSTRONG		Date of Receipt MM / DD / YYYY 02 / 11 / 2014 Transaction ID : SA11.15359547
Mailing Address 49 STONEWOOD TER		Amount of Each Receipt this Period 100.00
City VERNON ROCKVL	State CT	Zip Code 06066-4411
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) C. DOYLE L. ARNOLD		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11.15370324
Mailing Address 1439 E PERRYS HOLLOW DR		Amount of Each Receipt this Period 500.00
City SALT LAKE CITY	State UT	Zip Code 84103-4254
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer ZIONS BANCORPORATION	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. THOMAS B. ARTHUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 S MACDILL AVE
 STE. 340
 City TAMPA State FL Zip Code 33629-5244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15380802
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. GERRY ASCHINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4425 KEARNEY RD
 City LEXINGTON State KY Zip Code 40511-9008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381051
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MR. ERWIN K. AULIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2133 N. MAGNOLIA AVENUE
 UNIT B
 City CHICAGO State IL Zip Code 60614-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTHWOOD INVESTORS Occupation REAL ESTATE/PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15388817
 Amount of Each Receipt this Period 32400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 33650.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. GORDON T. AUSTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 423 N LAKESHORE DR
 City CARROLLTON State GA Zip Code 30117-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15337518
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. DR. SERPIL AYASLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 HAWTHORNE VILLAGE ROAD
 City NASHUA State NH Zip Code 03062-2273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388810
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

C. MR. HENRY BAIN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7073 SAN PEDRO AVE
 City SAN ANTONIO State TX Zip Code 78216-6209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BMB Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379380
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	34425.00
TOTAL This Period (last page this line number 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 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM BAIN JR.

Mailing Address 307 ESSEX RIDGE CT

City State Zip Code
SPARTANBURG SC 29307-1540

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374430

Amount of Each Receipt this Period
750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. KEVIN H. BAINES

Mailing Address 457 S MAREOSO AVE UNIT 21

City State Zip Code
PASADENA CA 91101

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

Name of Employer Occupation
CALTECH / SPL RESEARCH SCIENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360997

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ELI BAKSHI

Mailing Address 4314 MARINA CITY DR. UNIT 922

City State Zip Code
MARINA DEL REY CA 90292

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF(

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15349719

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JAMES A. BALLENTINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5830 LAUNGFORD BAY RD
 City CHESTERTOWN State MD Zip Code 21620-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 06 / 2014**
Transaction ID : SA11.15342476
 Amount of Each Receipt this Period **300.00**
 CONTRIBUTION

B. CHARLEY F. BALLOU
 Full Name (Last, First, Middle Initial)
 Mailing Address 19706 MALONE RD.
 City TECUMSEH State OK Zip Code 74873-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 21 / 2014**
Transaction ID : SA11.15374495
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

C. MRS. IMELDA D. BAMBERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 20941 SAILMAKER CIR.
 City HUNTINGTN BEACH State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **301.00**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11.15350196
 Amount of Each Receipt this Period **150.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ALFRED BARBOUR
Full Name (Last, First, Middle Initial)

Mailing Address 155 DARLINGTON LANE

City SEWICKLEY State PA Zip Code 15143-9420

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

Name of Employer CONCAST METALS Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379452

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

B. MRS. MARY E. BARBOUR
Full Name (Last, First, Middle Initial)

Mailing Address 155 DARLINGTON LANE

City SEWICKLEY State PA Zip Code 15143-9420

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379453

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

C. MS. MARY BARGER
Full Name (Last, First, Middle Initial)

Mailing Address 301 CHELSEA RD

City MONTICELLO State MN Zip Code 55362-8430

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

Name of Employer SUBURBAN MANUFACTURING INC. Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376530

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. MICHAEL BARGER
Full Name (Last, First, Middle Initial)

Mailing Address 170 BRIGHTWATERS BLVD NE

City	State	Zip Code
SAINT PETERSBURG	FL	33704-3608

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

Name of Employer	Occupation
HOME DEVELOPER	SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379633

Amount of Each Receipt this Period
 1250.00

CONTRIBUTION

B. MS. HELEN R. BARKER
Full Name (Last, First, Middle Initial)

Mailing Address 1700 ANTIGUA WAY

City	State	Zip Code
NEWPORT BEACH	CA	92660-4346

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

Name of Employer	Occupation
ABI	EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383192

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

C. MRS. DIANE BARKLEY
Full Name (Last, First, Middle Initial)

Mailing Address 703 TOPS L DR

City	State	Zip Code
MANDEVILLE	LA	70448-6803

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

Name of Employer	Occupation
PORT OF NEW ORLEANS	LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376513

Amount of Each Receipt this Period
 125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1675.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ANDREW BARNARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 WILLIAM STREET
 FLOOR 5
 City NEW YORK State NY Zip Code 10038-5044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FAIRFAX INSURANCE GROUP PRESIDENT AND CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388826
 Amount of Each Receipt this Period
 32000.00
 CONTRIBUTION

B. MR. JOHN F. BARNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376469
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MR. NORMAN BARNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 LAZENBY ST
 City MONROEVILLE State AL Zip Code 36460-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344806
 Amount of Each Receipt this Period
 201.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	32301.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. NORMAN BARNETT
Full Name (Last, First, Middle Initial)

Mailing Address 35 LAZENBY ST

City MONROEVILLE State AL Zip Code 36460-1303

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15380591

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

B. MR. NORMAN BARNETT
Full Name (Last, First, Middle Initial)

Mailing Address 35 LAZENBY ST

City MONROEVILLE State AL Zip Code 36460-1303

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384143

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

C. MRS. SIRVART BARONIAN
Full Name (Last, First, Middle Initial)

Mailing Address 425 E 74TH ST APT 2D

City NEW YORK State NY Zip Code 10021-3923

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

Name of Employer BARNEY'S NY, NY Occupation LADIES TAILOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364536

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. PAUL B. BARRINGER
Full Name (Last, First, Middle Initial)

Mailing Address 14 S CALIBOGUE CAY RD

City HILTON HEAD ISLAND State SC Zip Code 29928-2912

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014
Transaction ID : SA11.15339191

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. PAMELA T. BARTLETT
Full Name (Last, First, Middle Initial)

Mailing Address 156 GREELEY ST.

City HUDSON State NH Zip Code 03051-3422

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15353090

Amount of Each Receipt this Period
251.00

CONTRIBUTION

C. MR. LARRY C. BASDEN
Full Name (Last, First, Middle Initial)

Mailing Address 12516 SHIRE LN

City OKLAHOMA CITY State OK Zip Code 73170-4761

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

Name of Employer Occupation
HAGAR RESTAURANT SERVICE MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA11.15373734

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 751.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TONY BATCHELOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2206

City SOUTH PORTLAND State ME Zip Code 04116-2206

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2014
Transaction ID : SA11.15361333

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. WARREN F. BATEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 5119 SW 71ST. PL.

City MIAMI State FL Zip Code 33155-5639

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014
Transaction ID : SA11.15375514

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. MR. EARLE S. BATES
Full Name (Last, First, Middle Initial)

Mailing Address 160 KENDAL DR APT 214

City LEXINGTON State VA Zip Code 24450-1791

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2014
Transaction ID : SA11.15378115

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

Mailing Address 50683 COLCHESTER COURT

City CANTON State MI Zip Code 48187-4464

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

Name of Employer INTRA CORP Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15339566

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. DENA BATTLE
Full Name (Last, First, Middle Initial)

Mailing Address 901 15TH STREET NW
SUITE 500

City WASHINGTON State DC Zip Code 20005-2319

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

Name of Employer CAPITOL COUNSEL LLC Occupation INFORMATION REQUESTED PER BEST EFF

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
 02 / 20 / 2014
Transaction ID : SA11.15376775

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. MRS. JOAN BEARD
Full Name (Last, First, Middle Initial)

Mailing Address 503 FOREST CIR

City TROY State AL Zip Code 36081-1626

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15343656

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. KENNETH H. BEARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3711 MADISON ST.
 City OAK BROOK State IL Zip Code 60523-2757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15384118
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

B. SCOTT BEAUMONT
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SAGEWOOD DR
 City MALVERN State PA Zip Code 19355-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SUGARTOWN WORLDWIDE LLC Occupation GENERAL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15345679
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MS. MARCIA A. BECKMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5130 S. FORT APACHE RD. STE.215-44
 City LAS VEGAS State NV Zip Code 89148-1719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 08 / 2014
Transaction ID : SA11.15346147
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (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 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MICHAEL BEER

Mailing Address 6943 LERWICK

City State Zip Code
ALEXANDRIA VA 22315-5717

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

Name of Employer Occupation
WILLIAMS & JENSEN LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15367821

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. STEVEN C. BEERING

Mailing Address 10487 WINDEMERE

City State Zip Code
CARMEL IN 46032-8594

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15352681

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DR. STEVEN C. BEERING

Mailing Address 10487 WINDEMERE

City State Zip Code
CARMEL IN 46032-8594

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11.15380184

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. MICHAEL BELL
Full Name (Last, First, Middle Initial)

Mailing Address 2525 WALLINGWOOD BLDG ELEVEN # 17

City AUSTIN State TX Zip Code 78746-6931

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

Name of Employer MICHAEL C BELL DDS PC Occupation DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15379376

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. HOYT BELLAMY
Full Name (Last, First, Middle Initial)

Mailing Address 5808 CANTERBURY LANE

City MYRTLE BEACH State SC Zip Code 29577-2208

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

Name of Employer ACCUCHEX INC Occupation PAYROLL SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15339670

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. RAY BELLAMY
Full Name (Last, First, Middle Initial)

Mailing Address 509 VINNEDGE RIDE

City TALLAHASSEE State FL Zip Code 32303-5141

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

Name of Employer TALLAHASSEE ORTHOPEDIC CLINIC Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 01 / 2014
Transaction ID : SA11.15331282A

Amount of Each Receipt this Period 250.00

CONTRIBUTION

CHARGED BACK \$250.00 ON 02/03/2014

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. RAY BELLAMY

Mailing Address 509 VINNEDGE RIDE

City State Zip Code
TALLAHASSEE FL 32303-5141

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

Name of Employer Occupation
TALLAHASSEE ORTHOPEDIC CLINIC PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331282B

Amount of Each Receipt this Period
-250.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)
B. MR. DALE E. BENSON

Mailing Address 6416 SW LOOP DR

City State Zip Code
PORTLAND OR 97221-3385

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15359830

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DALE E. BENSON

Mailing Address 6416 SW LOOP DR

City State Zip Code
PORTLAND OR 97221-3385

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15368008

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ -50.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DALE E. BENSON

Mailing Address 6416 SW LOOP DR

City State Zip Code
PORTLAND OR 97221-3385

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2014
Transaction ID : SA11.15373415

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DEAN M. BERG

Mailing Address 10167 NORTH CARRISTO DRIVE

City State Zip Code
TUCSON AZ 85737-9487

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15352745

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JOEL E. BERGMAN

Mailing Address 10817 739 RD

City State Zip Code
LOOMIS NE 68958-5845

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

Name of Employer Occupation
FARMER SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15346248

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CHRISTIAN BERLE

Mailing Address **6 SNOWS COURT**

City **WASHINGTON** State **DC** Zip Code **20037-2213**

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

Name of Employer **FREEDOM TO WORK** Occupation **LOBBYIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
02 / 13 / 2014
Transaction ID : SA11.15362316

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. ALLEN D. BERRY JR.

Mailing Address **2100 S BERRYS CHAPEL RD**

City **FRANKLIN** State **TN** Zip Code **37069-8302**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
02 / 28 / 2014
Transaction ID : SA11.15384706

Amount of Each Receipt this Period
400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ALEXANDER A. BERTOLLA

Mailing Address **PO BOX 216**

City **ROBERTSDALE** State **AL** Zip Code **36567-0216**

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

Name of Employer **BERTOLLA FARM SUPPLY COMPANY** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
02 / 11 / 2014
Transaction ID : SA11.15348908

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GARY C. BHOJWANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 3301 SHORE DRIVE
 City EXCELSIOR State MN Zip Code 55331-7815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALLIANZ LIFE OF AMERICA Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388836
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. MR. STEPHEN D. BICKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 SADDLEBROOK LANE
 City HOUSTON State TX Zip Code 77024-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359879
 Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

C. LYNN R. BIDDISON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 69280
 City TUCSON State AZ Zip Code 85737-0013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376315
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BRUCE A. BIGGERSTAFF
Full Name (Last, First, Middle Initial)

Mailing Address 3638 CITADELL CIRCLE

City NEWBURGH State IN Zip Code 47630-7903

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15351490

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. MRS. JOSEPHINE BIGLER
Full Name (Last, First, Middle Initial)

Mailing Address 104 E JACKSON AVE S

City SAPULPA State OK Zip Code 74066-5623

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15361288

Amount of Each Receipt this Period 110.00

CONTRIBUTION

C. DR. CARTER R. BISHOP
Full Name (Last, First, Middle Initial)

Mailing Address 315 JUDD RD

City MILAN State MI Zip Code 48160-8913

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

Name of Employer WAYNE STATE UNIVERSITY SCHOOL OF ME Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.1537768

Amount of Each Receipt this Period 251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 611.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. CHARLES C. BLACKWELL JR.
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2149

City CLAYPOOL State AZ Zip Code 85532-2149

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344877

Amount of Each Receipt this Period
 75.00

CONTRIBUTION

B. CHARLES C. BLACKWELL JR.
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2149

City CLAYPOOL State AZ Zip Code 85532-2149

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370590

Amount of Each Receipt this Period
 150.00

CONTRIBUTION

C. MR. BRUCE H. BLAKEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7201

City WOODINVILLE State WA Zip Code 98072-4001

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

Name of Employer WESMAR Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15376899

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1225.00
TOTAL This Period (last page this line number 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 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. MARVIN BLECKER

Mailing Address 12824 SILVER ACACIA PL

City State Zip Code
SAN DIEGO CA 92130-4899

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

Name of Employer Occupation
QUALCOMM INCORPORATED CORPORATE LICENSING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1001.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360684

Amount of Each Receipt this Period
1001.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. RICHARD V. BLOMSTROM

Mailing Address P.O. BOX 2972

City State Zip Code
SPRINGFIELD MA 01101-2972

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374457

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RICHARD V. BLOMSTROM

Mailing Address P.O. BOX 2972

City State Zip Code
SPRINGFIELD MA 01101-2972

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15380283

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1201.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. RICHARD V. BLOMSTROM
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2972
 City SPRINGFIELD State MA Zip Code 01101-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383918
 Amount of Each Receipt this Period
 115.00
 CONTRIBUTION

B. JEFFREY B. BLOOHM
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 86
 City BROWNSVILLE State WI Zip Code 53006-0086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15338328
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. ALLEN BOGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 LOMAX CV
 City AUSTIN State TX Zip Code 78732-2482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371250
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1365.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (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 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROY S. BOGGAN
Full Name (Last, First, Middle Initial)

Mailing Address 1472 LEGACY DRIVE

City BIRMINGHAM State AL Zip Code 35242-6060

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

Name of Employer RIO HORIZONS, INC. Occupation C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381068

Amount of Each Receipt this Period 300.00

CONTRIBUTION

B. MR. DARCY BONNER
Full Name (Last, First, Middle Initial)

Mailing Address 205 WEST WACKIER DRIVE #307

City CHICAGO State IL Zip Code 60606-1487

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

Name of Employer SELF-EMPLOYED Occupation ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331693

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. MR. STEPHEN K. BOONE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 12600

City OLYMPIA State WA Zip Code 98508-2600

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15357706

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. FRANCIS C. BOUCEK
Full Name (Last, First, Middle Initial)

Mailing Address 399 TAMIAMI TRL N STE 300

City NAPLES	State FL	Zip Code 34102-5820
----------------	-------------	------------------------

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

Name of Employer ANCHOR HEALTH CENTERS	Occupation PHYSICIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15348913

Amount of Each Receipt this Period
550.00

CONTRIBUTION

B. MR. ROGER BOUGIE
Full Name (Last, First, Middle Initial)

Mailing Address 19 MIDDLEFIELD DR

City W HARTFORD	State CT	Zip Code 06107-1245
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15382939

Amount of Each Receipt this Period
90.00

CONTRIBUTION

C. MARIE T. BOWDEN
Full Name (Last, First, Middle Initial)

Mailing Address 109 RAINBOW DR. # 917

City LIVINGSTON	State TX	Zip Code 77399-1009
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15384266

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	690.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 38 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. REV. KARL W. BOWMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 TANNER AVE
 City ELIZABETH State PA Zip Code 15037-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376709
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MR. VINAL BOWYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2539 S WILLOW CREEK DR
 City PERU State IN Zip Code 46970-7202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376538
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. BONNIE BOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 KYNWYD RD
 City WILMINGTON State DE Zip Code 19810-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344023
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 39 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BONNIE BOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 KYNWYD RD
 City State Zip Code
 WILMINGTON DE 19810-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.1535563
 Amount of Each Receipt this Period
 16.00
 CONTRIBUTION

B. BONNIE BOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 KYNWYD RD
 City State Zip Code
 WILMINGTON DE 19810-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.1535811
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. BONNIE BOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 KYNWYD RD
 City State Zip Code
 WILMINGTON DE 19810-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370320
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BONNIE BOYD
Full Name (Last, First, Middle Initial)
Mailing Address 2008 KYNWYD RD

City WILMINGTON	State DE	Zip Code 19810-3844
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

Transaction ID : SA11.15374458

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. BONNIE BOYD
Full Name (Last, First, Middle Initial)
Mailing Address 2008 KYNWYD RD

City WILMINGTON	State DE	Zip Code 19810-3844
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15378513

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. MR. PATRICK D. BRACKETT SR.
Full Name (Last, First, Middle Initial)
Mailing Address 2102 COLLEGE STREET

City JACKSONVILLE	State FL	Zip Code 32204-3706
----------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2014

Transaction ID : SA11.15339175

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 41 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. JO ANN BRASSFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 10009 ROBIN OAKS DR
 City LAS VEGAS State NV Zip Code 89117-0949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15354795
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

B. MS. CAROLYN L. BREHM
 Full Name (Last, First, Middle Initial)
 Mailing Address 3023 DUMBARTON STREET N.W.
 City WASHINGTON State DC Zip Code 20007-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROCTER & GAMBLE Occupation BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15373484
 Amount of Each Receipt this Period 1500.00
 CONTRIBUTION

C. DR. BOYD K. BRESNAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 545 ELM GROVE ROAD APT 4
 City ELM GROVE State WI Zip Code 53122-2543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15378452
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 42 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DONALD J. BREUNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 243 VAGABOND CT
 City ALAMO State CA Zip Code 94507-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376514
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. MR. JOHN A. BRIGGS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 406
 City EAU CLAIRE State WI Zip Code 54702-0406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAM'S AUTO SUPPLY Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379554
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

C. MR. PHILIP W. BRIGGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 BLOOMING GROVE LN
 City HOUSTON State TX Zip Code 77077-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375787
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BRUCE E. BRINER
Full Name (Last, First, Middle Initial)

Mailing Address 12700 N 1ST ST

City PARKER State CO Zip Code 80134-9429

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373743

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. ROSALIND BRINKLEY
Full Name (Last, First, Middle Initial)

Mailing Address 502 EAST 13TH STREET

City CAMERON State TX Zip Code 76520-1919

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15357204

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. DONALD R. BROADLAND
Full Name (Last, First, Middle Initial)

Mailing Address 3535 E 66TH ST

City TULSA State OK Zip Code 74136-2632

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

Name of Employer SELF-EMPLOYED Occupation COMMERCIAL REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383859

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. GLORIA MONCUR BROADDUS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 205
 City IRVINGTON State VA Zip Code 22480-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15343892
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MRS. GLORIA MONCUR BROADDUS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 205
 City IRVINGTON State VA Zip Code 22480-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355601
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. RONALD E. BROTHERS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 DALTON RD
 City PALOS VERDES ESTATES State CA Zip Code 90274-1837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361286
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. RONALD E. BROTHERS JR.
Full Name (Last, First, Middle Initial)
Mailing Address 1700 DALTON RD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15368973

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. RONALD E. BROTHERS JR.
Full Name (Last, First, Middle Initial)
Mailing Address 1700 DALTON RD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014
Transaction ID : SA11.15374194

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. RONALD E. BROTHERS JR.
Full Name (Last, First, Middle Initial)
Mailing Address 1700 DALTON RD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15383800

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 46 OF 637
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DAVID BROWN

Mailing Address 415 NORTH ROCKINGHAM AVENUE

City	State	Zip Code
LOS ANGELES	CA	90049-2637

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

Name of Employer	Occupation
SELF EMPLOYED	MERCHANT BANKING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375607

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. DAVID G. BROWN

Mailing Address 950 TIMBER GLEN LN

City	State	Zip Code
WILMINGTON	OH	45177-2512

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

Name of Employer	Occupation
SELF-EMPLOYED	PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15363169

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. THOMAS BRUDER

Mailing Address 600 REED ROAD SUITE 301
SUITE 301

City	State	Zip Code
BROOMALL	PA	19008-3505

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381586

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. KATHLEEN R. BRUGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6815 FOXTAIL CT
 City RANCHO CUCAMONGA State CA Zip Code 91739-1577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NATIONAL FEDERATION OF REPUBLICAN W Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15379448
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. MR. JAMES P. BRUNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 CAROBETH DRIVE
 City JACKSONVILLE State IL Zip Code 62650-2699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNITED CONTRACTORS MIDWEST INC Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15388809
 Amount of Each Receipt this Period 30000.00
 CONTRIBUTION

C. MS. JACQUELINE BRUTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 CROSSPOINT APT 409
 City BOERNE State TX Zip Code 78006-3105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15342001
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 31100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. JACQUELINE BRUTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 CROSSPOINT APT 409
 City BOERNE State TX Zip Code 78006-3105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369910
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MS. PATRICIA W. BRYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 WISHING WELL AVE
 City NEWPORT State VT Zip Code 05855-9630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation BED & BREAKFAST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371709
 Amount of Each Receipt this Period
 400.00
 CONTRIBUTION

C. MR. GEOFFREY A. BRYCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N LA SALLE ST STE 2700
 City CHICAGO State IL Zip Code 60601-1099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11.15359721
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BARRY BUCHHOLZ
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 349
 City CUTHBERT State GA Zip Code 39840-0349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15373501
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

B. MR. HARRY J. BUCKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 WOODBINE AVE.
 City NORTHPORT State NY Zip Code 11768-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374476
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

C. W. P. BUCKTHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 S LINCOLN ST
 City AMARILLO State TX Zip Code 79101-3638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PETROLEUM GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15340590
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. KAREN L. BUHL
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 NELTOM DR
 City PIERRE State SD Zip Code 57501-4806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation RENTAL PROPERTY OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15373730
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

B. MR. RON BULHOLZER
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 234
 City MONROE State WI Zip Code 53566-0234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KLONDIKE CHEESE CO. Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.00**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11.15346277
 Amount of Each Receipt this Period **507.00**
 CONTRIBUTION

C. REV. THOMAS J. BURDICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 31579 VINTNERS POINTE COURT
 City WINCHESTER State CA Zip Code 92596-8318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLESSED TERESA OF CALCUTTA Occupation CATHOLIC PRIEST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 12 / 2014**
Transaction ID : SA11.15361808
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1757.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 51 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. WILLIAM BURGIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4091 BANDERA HWY
 City KERRVILLE State TX Zip Code 78028-9631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15342000
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

B. DR. WILLIAM BURGIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4091 BANDERA HWY
 City KERRVILLE State TX Zip Code 78028-9631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15368558
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

C. DR. WILLIAM BURGIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4091 BANDERA HWY
 City KERRVILLE State TX Zip Code 78028-9631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15374788
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 52 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ALAN RAY BURKART

Mailing Address 5131 HIGH DESERT PL NE

City State Zip Code
ALBUQUERQUE NM 87111-9204

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379345

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PETER H. BURLEIGH

Mailing Address 3140 BOLGOS CIR.

City State Zip Code
ANN ARBOR MI 48105-1564

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361283

Amount of Each Receipt this Period
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. ROBERTA K. BURNETT

Mailing Address 2803 STANBRIDGE ST 715 B

City State Zip Code
NORRISTOWN PA 19401-1658

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374463

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00

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

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

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

FOR LINE NUMBER: PAGE 53 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. ROBERTA K. BURNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2803 STANBRIDGE ST 715 B
 City NORRISTOWN State PA Zip Code 19401-1658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374466
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

B. MR. TOMMY M. BURNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 86 N PACKLET RD
 City CAMPOBELLO State SC Zip Code 29322-9704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BURNETT LIME CO. INC. Occupation SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376637
 Amount of Each Receipt this Period 600.00
 CONTRIBUTION

C. DR. HAROLD E. BUTTRAM
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 60
 City BLOOMING GLEN State PA Zip Code 18911-0060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376616
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. LARRY R. BYRD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13543 SPRUCEWOOD DR
 City DALLAS State TX Zip Code 75240-3630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.15383533
 Amount of Each Receipt this Period **300.00**
 CONTRIBUTION

B. MR. RICK J. CAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 MILL STONE DR.
 City DAYTON State OH Zip Code 45434-5840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BOOZ ALAN HAMILTON Occupation DATA BASE ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **207.00**

Date of Receipt **02 / 05 / 2014**
Transaction ID : SA11.15331784
 Amount of Each Receipt this Period **207.00**
 CONTRIBUTION

C. MRS. SUSAN A. CAMPBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 824 FRANDORA LN
 City HOUSTON State TX Zip Code 77024-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 25 / 2014**
Transaction ID : SA11.15378195
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	607.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. SUSAN A. CAMPBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 824 FRANDORA LN
 City HOUSTON State TX Zip Code 77024-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt: **02 / 28 / 2014**
Transaction ID : SA11.15384750
 Amount of Each Receipt this Period: **100.00**
CONTRIBUTION

B. JAMES J. CANNELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3505 MAJESTIC OAKS DR
 City SAINT CHARLES State IL Zip Code 60174-7959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **INFORMATION REQUESTED PER BEST EFFORTS** Occupation: **INFORMATION REQUESTED PER BEST EFF**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt: **02 / 28 / 2014**
Transaction ID : SA11.15383339
 Amount of Each Receipt this Period: **250.00**
CONTRIBUTION

C. ALICE CANNON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 37634
 City RALEIGH State NC Zip Code 27627-7634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **266.00**

Date of Receipt: **02 / 06 / 2014**
Transaction ID : SA11.15342578
 Amount of Each Receipt this Period: **55.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	405.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ALICE CANNON		Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11.15364525
Mailing Address P.O. BOX 37634		Amount of Each Receipt this Period 55.00
City RALEIGH	State NC	Zip Code 27627-7634
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) B. ALICE CANNON		Date of Receipt MM / DD / YYYY 02 / 21 / 2014 Transaction ID : SA11.15374478
Mailing Address P.O. BOX 37634		Amount of Each Receipt this Period 100.00
City RALEIGH	State NC	Zip Code 27627-7634
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) C. MRS. GLENDA S. CANO		Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11.15376612
Mailing Address PO BOX 791731		Amount of Each Receipt this Period 400.00
City SAN ANTONIO	State TX	Zip Code 78279-1731
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NORTH STAR PROPERTIES	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	555.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BRAD CARD
Full Name (Last, First, Middle Initial)

Mailing Address 412 FIRST STREET SE
SUITE 100

City WASHINGTON State DC Zip Code 20003-1804

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

Name of Employer DUTKO GRAYLING Occupation MANAGING PRINCIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 25 / 2014
Transaction ID : SA11.15379447

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. MR. DON CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 16504 KIPLING ROAD

City DERWOOD State MD Zip Code 20855-1929

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

Name of Employer WEATHERFORD/
PRICEWATERHOUSECOOPERS Occupation MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15359885

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. MR. CARL D. CARMAN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1368

City CAREFREE State AZ Zip Code 85377-1368

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

Name of Employer SELF-EMPLOYED Occupation VENTURE CAPITALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 14 / 2014
Transaction ID : SA11.15362899

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOSEPH M. CARSON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 WALNUT AVE.
 City SAINT CLAIRSVILLE State OH Zip Code 43950-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation DAIRY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15383858
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MS. BETTY J. CASABURI
 Full Name (Last, First, Middle Initial)
 Mailing Address 17936 CABELA DR
 City SAN DIEGO State CA Zip Code 92127-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15384282
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. MRS. SHIRLEY CASSERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 MAIDSTONE DR
 City NEWPORT BEACH State CA Zip Code 92660-4271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15392715
 Amount of Each Receipt this Period -35.00
 CONTRIBUTION
 CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 565.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT CASTELLANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2975 ROPER MOUNTAIN ROAD
 City SIMPSONVILLE State SC Zip Code 29681-4848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTH AMERICAN RESCUE Occupation FOUNDER/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11.15359896
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

B. MS. MARLENE J. CATINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 93 GLENDALE AVE
 City MELROSE State MA Zip Code 02176-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **357.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15373585
 Amount of Each Receipt this Period **207.00**
 CONTRIBUTION

C. MS. MARLENE J. CATINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 93 GLENDALE AVE
 City MELROSE State MA Zip Code 02176-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **357.00**

Date of Receipt **02 / 27 / 2014**
Transaction ID : SA11.15379618
 Amount of Each Receipt this Period **150.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1357.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 60 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM H. CHAMBERLAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 ROBERTS AVE
 City HADDONFIELD State NJ Zip Code 08033-1319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15362257
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. DR. HAROLD L. CHAPEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4667 WEST 21ST STREET CIRCLE
 City GREELEY State CO Zip Code 80634-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BANNER HEALTH Occupation HEALTH CARE WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361183
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. FRED A. CHAPMAN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1754
 City ARDMORE State OK Zip Code 73402-1754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356923
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. GREGORY CHARLOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 725 GELSTON PL
 City EL CERRITO State CA Zip Code 94530-3044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAISER Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.15381523
 Amount of Each Receipt this Period **350.00**
 CONTRIBUTION

B. JOSEPHINE CHESBROUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6539 GREENSPORT RD.
 City ASHVILLE State AL Zip Code 35953-5227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 07 / 2014**
Transaction ID : SA11.15347457
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

C. JOSEPHINE CHESBROUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6539 GREENSPORT RD.
 City ASHVILLE State AL Zip Code 35953-5227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 18 / 2014**
Transaction ID : SA11.15364326
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 62 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOSEPHINE CHESBROUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6539 GREENSPORT RD.
 City ASHVILLE State AL Zip Code 35953-5227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383173
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. ROBERT CHESEBRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 216 EUCLID AVE
 City SHEBOYGAN State WI Zip Code 53083-5052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WIGWAM CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15367914
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. ANDREW CHESNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 960 WOODSIDE TERRACE
 City FREEPORT State IL Zip Code 61032-6769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SEAGA DIVISION SALES MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381654
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 63 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. NICK CHICKERING
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 JENNINGS LAKESIDE ROAD
 City State Zip Code
 WHITEFISH MT 59937-3341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15358711
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. JAMES CHILDERS M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2960 N LAKE SHORE DR APT 2701
 City State Zip Code
 CHICAGO IL 60657-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345480
 Amount of Each Receipt this Period
 115.00
 CONTRIBUTION

C. MR. JAMES CHILDERS M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2960 N LAKE SHORE DR APT 2701
 City State Zip Code
 CHICAGO IL 60657-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361282
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 715.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 637		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ALAN CHILES
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 116
 City LITCHFIELD State IL Zip Code 62056-0116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350845
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. SOPHIA CHITJIAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 FOXHOUND DR.
 City LAFAYETTE HILL State PA Zip Code 19444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ART INSTITUTE OF PHILADELPHIA ARTIST/PROFESSOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374286
 Amount of Each Receipt this Period
 76.00
 CONTRIBUTION

C. SOPHIA CHITJIAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 FOXHOUND DR.
 City LAFAYETTE HILL State PA Zip Code 19444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ART INSTITUTE OF PHILADELPHIA ARTIST/PROFESSOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374527
 Amount of Each Receipt this Period
 55.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	381.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. SOPHIA CHITJIAN		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15378850
Mailing Address 314 FOXHOUND DR.		Amount of Each Receipt this Period 75.00
City LAFAYETTE HILL	State PA	Zip Code 19444
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer ART INSTITUTE OF PHILADELPHIA	Occupation ARTIST/PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

Full Name (Last, First, Middle Initial) B. MR. GARY CHOUET		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15359887
Mailing Address P.O. BOX 310		Amount of Each Receipt this Period 20000.00
City GALLIANO	State LA	Zip Code 70354-0310
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer EDISON CHOUET OFFSHORE	Occupation SHIP OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) C. DR. ROBERT C. CIARDULLO		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15385001
Mailing Address 135 OSBORN RD		Amount of Each Receipt this Period 500.00
City HARRISON	State NY	Zip Code 10528-1017
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation DOCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	20575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. RODOLFO D. CILENTO

Mailing Address 178 EDGEWATER CIRCLE

City SUNSET BEACH	State NC	Zip Code 28468-4412
----------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375701

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROSALIE G. CIMINELLI

Mailing Address 970 CAPE MARCO DR. APT. 1602

City MARCO ISLAND	State FL	Zip Code 34145-6658
----------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340176

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ROSALIE G. CIMINELLI

Mailing Address 970 CAPE MARCO DR. APT. 1602

City MARCO ISLAND	State FL	Zip Code 34145-6658
----------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361312

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 67 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. DEBBIE CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 GOLDEN WAY
 City BEAUMONT State CA Zip Code 92223-7182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COUNTY OF SAN BERNARDINO Occupation COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331538
 Amount of Each Receipt this Period -42.00
 CONTRIBUTION
 CHARGED BACK

B. MR. EDWIN V. CLARKE JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 ACADEMY AVE
 City SEWICKLEY State PA Zip Code 15143-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374283
 Amount of Each Receipt this Period 301.00
 CONTRIBUTION

C. MR. KIRK CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 938
 City MCALLEN State TX Zip Code 78505-0938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation AUTOMOBILIE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15369594
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 759.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 68 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROGER W. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 RADCLIFFE AVE
 City BAKERSFIELD State CA Zip Code 93305-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350081
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

B. MR. ROGER W. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 RADCLIFFE AVE
 City BAKERSFIELD State CA Zip Code 93305-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15354947
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. MR. ROGER W. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 RADCLIFFE AVE
 City BAKERSFIELD State CA Zip Code 93305-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361334
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROGER W. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 RADCLIFFE AVE
 City BAKERSFIELD State CA Zip Code 93305-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **586.00**

Date of Receipt **02 / 18 / 2014**
Transaction ID : SA11.15365493
 Amount of Each Receipt this Period **150.00**
 CONTRIBUTION

B. SANDRA J. CLARKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1930 GLENWOOD DR
 City OCEAN CITY State NJ Zip Code 08226-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15368157
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

C. MRS. WILLIAM H. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3716 MAPLEWOOD AVE
 City DALLAS State TX Zip Code 75205-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2350.00**

Date of Receipt **02 / 26 / 2014**
Transaction ID : SA11.15380032
 Amount of Each Receipt this Period **1450.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

Mailing Address 1369 WESTHAVEN RD

City SAN MARINO	State CA	Zip Code 91108-2018
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2014

Transaction ID : SA11.15359936

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. WILLIAM CLAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 1369 WESTHAVEN RD

City SAN MARINO	State CA	Zip Code 91108-2018
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15370155

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. MR. DAVID CLEMENS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 962

City HALLSTEAD	State PA	Zip Code 18822-0962
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15374776

Amount of Each Receipt this Period
300.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD R. CLEMENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 PINEDALE STREET
 City SOUTHBRIDGE State MA Zip Code 01550-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HYDE GROUP INC Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.1536956
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MRS. BARBARA A. CLIFFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9213 WH BURGESS DR
 City EL PASO State TX Zip Code 79925-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 652.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.1533180
 Amount of Each Receipt this Period 350.00
 CONTRIBUTION

C. MRS. BARBARA A. CLIFFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9213 WH BURGESS DR
 City EL PASO State TX Zip Code 79925-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 652.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15376335
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 72 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. BARBARA A. CLIFFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9213 WH BURGESS DR
 City EL PASO State TX Zip Code 79925-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **652.00**

Date of Receipt: **02 / 25 / 2014**
Transaction ID : SA11.15376887
 Amount of Each Receipt this Period: **101.00**
CONTRIBUTION

B. ALAN COBB
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 S RIVER RD. STE. 466
 City BEDFORD State NH Zip Code 03110-6965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **INFORMATION REQUESTED PER BEST EFFORTS** Occupation: **INFORMATION REQUESTED PER BEST EFF**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **401.00**

Date of Receipt: **02 / 12 / 2014**
Transaction ID : SA11.15361321
 Amount of Each Receipt this Period: **200.00**
CONTRIBUTION

C. MS. ELEANOR COBB
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 S VISTA ST
 City LOS ANGELES State CA Zip Code 90036-2707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **701.00**

Date of Receipt: **02 / 24 / 2014**
Transaction ID : SA11.15376327
 Amount of Each Receipt this Period: **400.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **701.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT COCHRAN
Full Name (Last, First, Middle Initial)

Mailing Address 2052 LAKE AUDUBON COURT

City RESTON State VA Zip Code 20191-4808

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

Name of Employer 21ST CENTURY PAC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385500

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. ARLENE C. COFFMAN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1785

City PEBBLE BEACH State CA Zip Code 93953-1785

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384357

Amount of Each Receipt this Period
 135.00

CONTRIBUTION

C. MR. LUTHER COGGIN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3499

City PONTE VEDRA BEACH State FL Zip Code 32004-3499

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359891

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. LUTHER COGGIN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 3499
 City State Zip Code
 PONTE VEDRA BEACH FL 32004-3499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379441
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MR. ADAM COHEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 W. 67TH STREET
 APARTMENT 34G
 City State Zip Code
 NEW YORK NY 10023-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PARAMOUNT GROUP INC. DIRECTOR OF TAXATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373486
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. CHARLOTTE W. COINER
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 GRANBURG CIR
 City State Zip Code
 SAN ANTONIO TX 78218-3034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.1537657
 Amount of Each Receipt this Period
 400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DOUGLAS R. COLEMAN JR.
Full Name (Last, First, Middle Initial)

Mailing Address 140 S BROWN RD

City LONG LAKE State MN Zip Code 55356-9134

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373917

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MR. HOWARD COLLIER
Full Name (Last, First, Middle Initial)

Mailing Address 581 JOLLY ROGERS RD

City ABILENE State TX Zip Code 79601-2709

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15390375

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. DR. ROBERT D. COLLINS
Full Name (Last, First, Middle Initial)

Mailing Address 21500 LASSEN ST SPACE 168

City CHATSWORTH State CA Zip Code 91311-0807

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

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15354812

Amount of Each Receipt this Period
 350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. MARY K. COLWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15366669
 Amount of Each Receipt this Period 70.00
 CONTRIBUTION

B. MS. MARY K. COLWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374364
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

C. MR. HOWARD W. CONWAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 10524 LIVE OAK DR
 City FORNEY State TX Zip Code 75126-6643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC AUTOSALES Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15376306
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 420.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 77 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. CAROL L. COOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 585 S VALLEY DR
 City LAS CRUCES State NM Zip Code 88005-2733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376479
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. RALPH DAVID COPLEY JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1763 ROYAL OAKS DR APT F102
 City DUARTE State CA Zip Code 91010-1986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371067
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. JAMES M. CORNELIUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7012 HUNT CLUB DRIVE
 City INDIANAPOLIS State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GULDANT CORPORATION Occupation CHAIRMAN
 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
 02 / 18 / 2014
Transaction ID : SA11.15373487
 Amount of Each Receipt this Period
 25000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. S. CHRISTOPHER CORNWALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 494 EAST ILLINOIS ROAD
 City LAKE FOREST State IL Zip Code 60045-2363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11.15359895
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

B. FRED COUNTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 WINDY ACRES RD
 City CARRIERE State MS Zip Code 39426-8336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREYSTAR Occupation BALLAST CONTROL OPERATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15375254
 Amount of Each Receipt this Period **15.00**
 CONTRIBUTION

C. FRED COUNTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 WINDY ACRES RD
 City CARRIERE State MS Zip Code 39426-8336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREYSTAR Occupation BALLAST CONTROL OPERATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15375371
 Amount of Each Receipt this Period **15.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1030.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 79 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. MARGARET COWDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 CHURCHILL WAY
 City MIDLAND State TX Zip Code 79705-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15377786
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MR. ROBERT COWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2756 INIAND SPRINGS RD
 City MARIANNA State FL Zip Code 32446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15359939
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MR. ROBERT COWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2756 INIAND SPRINGS RD
 City MARIANNA State FL Zip Code 32446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15375813
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 650.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 OF 637
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT COWEN
Full Name (Last, First, Middle Initial)
Mailing Address 2756 INIAND SPRINGS RD
City MARIANNA State FL Zip Code 32446
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 801.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15383835
Amount of Each Receipt this Period 200.00
CONTRIBUTION

B. MR. RICHARD H. COX
Full Name (Last, First, Middle Initial)
Mailing Address 1951 KAKELA DR.
City HONOLULU State HI Zip Code 96822-2156
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15361932
Amount of Each Receipt this Period 400.00
CONTRIBUTION

C. MR. RUSSELL N. COX
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 192
City NEW CASTLE State NH Zip Code 03854-0192
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15381392
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JERRY S. COXSEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1969

City MIDDLEBURG State VA Zip Code 20118-1969

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

Name of Employer SELF-EMPLOYED Occupation JSC CONSTRUCTION INC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15380992

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. MRS. JEAN R. CRAEMER
Full Name (Last, First, Middle Initial)

Mailing Address 360 BAY WAY

City SAN RAFAEL State CA Zip Code 94901-2462

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15353995

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

C. MRS. JEAN R. CRAEMER
Full Name (Last, First, Middle Initial)

Mailing Address 360 BAY WAY

City SAN RAFAEL State CA Zip Code 94901-2462

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15368793

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

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

FOR LINE NUMBER: PAGE 82 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. JOHN M. CRAGIN LTC (RET)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 CRESTWOOD DR
 City JOPLIN State MO Zip Code 64801-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **266.00**

Date of Receipt: **02 / 04 / 2014**
Transaction ID : SA11.15346086
 Amount of Each Receipt this Period: **75.00**
CONTRIBUTION

B. MRS. JOHN M. CRAGIN LTC (RET)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 CRESTWOOD DR
 City JOPLIN State MO Zip Code 64801-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **266.00**

Date of Receipt: **02 / 10 / 2014**
Transaction ID : SA11.15349634
 Amount of Each Receipt this Period: **15.00**
CONTRIBUTION

C. ROBERT CRAIGMYLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2135 VIA FUENTES
 City VERO BEACH State FL Zip Code 32963-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **02 / 10 / 2014**
Transaction ID : SA11.15353220
 Amount of Each Receipt this Period: **100.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **190.00**
TOTAL This Period (last page this line number only)..... ►

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MS. AMY D. CRANE

Mailing Address 2450 PERSIMMON DRIVE

City State Zip Code
 ST. CHARLES IL 60174-5608

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

Name of Employer Occupation
 HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385528

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. CHRISTOPHER M. CRANE

Mailing Address 2450 PERSIMMON DRIVE

City State Zip Code
 SAINT CHARLES IL 60174-5608

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

Name of Employer Occupation
 EXELON PRESIDENT AND COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 31600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385521

Amount of Each Receipt this Period
 31600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CURTIS CRISP

Mailing Address 406 HARRIET AVENUE

City State Zip Code
 ELAINE AR 72333-8802

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

Name of Employer Occupation
 SELF-EMPLOYED FARM EQUIPMENT SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15362001

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 64500.00

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

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DAVID G. CRUMBAUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 1040 NORTH LAKE SHORE DRIVE APT 10
 City State Zip Code
 CHICAGO IL 60611-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15353577
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MS. JOAN CUMMINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City State Zip Code
 WESTCHESTER IL 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370211
 Amount of Each Receipt this Period
 1.00
 CONTRIBUTION

C. MS. JOAN CUMMINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City State Zip Code
 WESTCHESTER IL 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371649
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 351.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. JOAN CUMMINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15371721
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MRS. CHERYL CUSAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2230 S PINEY POINT RD
 City HOUSTON State TX Zip Code 77063-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15379627
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

C. MR. MELVIN L. CUTLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 IRIS DR
 City SALINAS State CA Zip Code 93906-3970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CUTLER ASSOCIATES Occupation ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15362488
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. JAMES N. D'ORSO

Mailing Address 809 DRAGONFLY COURT

City State Zip Code
 ROSEVILLE CA 95747-8617

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.1535088

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JAMES N. D'ORSO

Mailing Address 809 DRAGONFLY COURT

City State Zip Code
 ROSEVILLE CA 95747-8617

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379393

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JAMES N. D'ORSO

Mailing Address 809 DRAGONFLY COURT

City State Zip Code
 ROSEVILLE CA 95747-8617

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15382819

Amount of Each Receipt this Period
 55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 155.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

Mailing Address 26650 ROOKERY LAKE DR

City State Zip Code
BONITA SPRINGS FL 34134-1691

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361280

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MARIANN DAHLBERG

Mailing Address 635 4TH ST E

City State Zip Code
SONOMA CA 95476-7111

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374464

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JOHN DALTON

Mailing Address 1157 HANCOCK STREET

City State Zip Code
QUINCY MA 02169

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

Name of Employer Occupation
SELF-EMPLOYED DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379555

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

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

FOR LINE NUMBER: PAGE 88 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. CAROLYN J. DAMON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 791719
 City PAIA State HI Zip Code 96779-1719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15364640
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

B. MRS. CAROLYN J. DAMON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 791719
 City PAIA State HI Zip Code 96779-1719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15365940
 Amount of Each Receipt this Period 35.00
 CONTRIBUTION

C. MR. LEON A. DARGIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 19641 VINTAGE TRACE CIR
 City FORT MYERS State FL Zip Code 33967-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367131
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 685.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. MICHELLE DAVID
Full Name (Last, First, Middle Initial)

Mailing Address 33410 135TH PL SE

City AUBURN State WA Zip Code 98092-8513

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

Name of Employer MAGNOLIA SENIOR CARE Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376569

Amount of Each Receipt this Period
 175.00

CONTRIBUTION

B. ROGER DAVIDSON
Full Name (Last, First, Middle Initial)

Mailing Address 28 DEER TRACK LANE

City GOLDENS BRIDGE State NY Zip Code 10526-1207

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

Name of Employer SELF-EMPLOYED Occupation MUSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15359821

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. MR. PAUL L. DAVIES JR.
Full Name (Last, First, Middle Initial)

Mailing Address 3697 MT. DIABLO BLVD.
SUITE 205

City LAFAYETTE State CA Zip Code 94549-3754

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

Name of Employer THE CAMBRIA GROUP Occupation MANAGING PRINCIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376769

Amount of Each Receipt this Period
 16200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	16875.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOSEPH DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 4928 GLENVIEW ST

City CHINO HILLS	State CA	Zip Code 91709-7410
---------------------	-------------	------------------------

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

Name of Employer DAVIS FAM SCIMVIVON TRUST	Occupation SELF EMPLOYED
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15384155

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. NEILSON DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 352

City CENTER	State TX	Zip Code 75935-0352
----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15379841

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. MRS. SANDRA DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 1299 N TAMIAMI TRAIL APT 928

City SARASOTA	State FL	Zip Code 34236-2470
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SA11.15362879

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MRS. SANDRA DAVIS

Mailing Address 1299 N TAMIAMI TRAIL APT 928

City State Zip Code
SARASOTA FL 34236-2470

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374767

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. WILLIAM DAVIS

Mailing Address 6309 GREATWATER DRIVE

City State Zip Code
WINDERMERE FL 34786-5621

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

Name of Employer Occupation
DMM EXECUTIVE

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
 02 / 03 / 2014
Transaction ID : SA11.15331539

Amount of Each Receipt this Period
-10000.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)
C. MR. LA VELLE DAY

Mailing Address 14055 SW HIGH TOR DR

City State Zip Code
PORTLAND OR 97224-1421

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361458

Amount of Each Receipt this Period
750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **-9050.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. STEPHEN J. DE ARMOND
Full Name (Last, First, Middle Initial)

Mailing Address 3571 BRYANT ST

City PALO ALTO State CA Zip Code 94306-4207

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

Name of Employer UNIVERSITY OF CALIFORNIA Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1007.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376481

Amount of Each Receipt this Period
 1007.00

CONTRIBUTION

B. MR. DEWEY DEAN
Full Name (Last, First, Middle Initial)

Mailing Address 4121 WESTCHESTER DR

City WACO State TX Zip Code 76710-1324

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15392716A

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

CHARGED BACK \$25.00 ON 02/27/2014

C. MR. DEWEY DEAN
Full Name (Last, First, Middle Initial)

Mailing Address 4121 WESTCHESTER DR

City WACO State TX Zip Code 76710-1324

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15392716B

Amount of Each Receipt this Period
 -25.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶	1007.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. MICHAEL K. DEAN
Full Name (Last, First, Middle Initial)

Mailing Address 3029 DENT PLACE NW

City WASHINGTON State DC Zip Code 20007-2916

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

Name of Employer NCTA Occupation LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.1538824

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. DR. THOMAS L. DEBAUCHE
Full Name (Last, First, Middle Initial)

Mailing Address 12910 WEST SHADOW LAKE LANE

City CYPRESS State TX Zip Code 77429-5907

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

Name of Employer CYPRESS CARDIOLOGY Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361678

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. AUTRY O.V. DEBUSK
Full Name (Last, First, Middle Initial)

Mailing Address 200 DEBUSK LANE

City POWELL State TN Zip Code 37849-4703

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

Name of Employer DEROYAL Occupation CHAIRMAN AND OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385504

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. H. R. DECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 170009
 City ARLINGTON State TX Zip Code 76003-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **251.00**

Date of Receipt **02 / 12 / 2014**
Transaction ID : SA11.15361341
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

B. MS. LINDA L. DECKER-CONDON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1306 AULT VIEW AVE.
 City CINCINNATI State OH Zip Code 45208-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **02 / 06 / 2014**
Transaction ID : SA11.15392717
 Amount of Each Receipt this Period **-20.00**
 CONTRIBUTION
 CHECK RETURNED BY BANK

C. PAUL DECLEVA
 Full Name (Last, First, Middle Initial)
 Mailing Address 5222 DELOACHE AVE
 City DALLAS State TX Zip Code 75220-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **02 / 12 / 2014**
Transaction ID : SA11.15360241
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 95 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. PAUL DECLEVA
 Full Name (Last, First, Middle Initial)
 Mailing Address 5222 DELOACHE AVE
 City DALLAS State TX Zip Code 75220-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15372301
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. THOMAS M. DEDMONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3019 DEL PRADO
 City ALAMOGORDO State NM Zip Code 88310-3961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369871
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MR. THOMAS M. DEDMONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3019 DEL PRADO
 City ALAMOGORDO State NM Zip Code 88310-3961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374367
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. THOMAS M. DEDMONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3019 DEL PRADO
 City ALAMOGORDO State NM Zip Code 88310-3961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 25 / 2014**
Transaction ID : SA11.15376990
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

B. MR. RICHARD DEITERING
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 S WALNUT
 City BANCROFT State IA Zip Code 50517-8067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2014**
Transaction ID : SA11.15390314
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

C. MR. BERNIE DELAUNE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 228
 City ALICE State TX Zip Code 78333-0228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 21 / 2014**
Transaction ID : SA11.15367937
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 97 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILEY S. DENNIS

Mailing Address P.O. BOX 579

City State Zip Code
GAUTIER MS 39553-0579

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORT DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369669

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BLAKE DEVITT

Mailing Address 3215 W. GULF DR., UNIT E-102

City State Zip Code
SANIBEL FL 33957-5642

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376264

Amount of Each Receipt this Period
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CAROL ANN DIEHL

Mailing Address 2401 PENNSYLVANIA AVE APT 1105

City State Zip Code
WILMINGTON DE 19806-1417

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364222

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. STACEY A. DION
 Full Name (Last, First, Middle Initial)
 Mailing Address 238 12TH STREET, SE
 City WASHINGTON State DC Zip Code 20003-1428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BOEING COMPANY Occupation VP, CORPORATE PUBLIC POLICY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15367622
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. WILLIAM DIXON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2800 LIVELY BLVD.
 City ELK GROVE VILLAGE State IL Zip Code 60007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 3D EXHIBITS INC Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15347479
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. MRS. CAROLYN RUTH DOSSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5919 CENTERVILLE RD APT 100
 City SAINT PAUL State MN Zip Code 55127-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15358498
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. CAROLYN RUTH DOSSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5919 CENTERVILLE RD APT 100
 City SAINT PAUL State MN Zip Code 55127-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **02 / 26 / 2014**
Transaction ID : SA11.15380022
 Amount of Each Receipt this Period: **100.00**
CONTRIBUTION

B. MR. MARK DREYFUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5555 GREENWICH ROAD
 City VIRGINIA BEACH State VA Zip Code 23462-6542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **ECPI** Occupation: **EDUCATION MANAGER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt: **02 / 07 / 2014**
Transaction ID : SA11.15337519
 Amount of Each Receipt this Period: **10000.00**
CONTRIBUTION

C. MR. RICHARD H. DRIEHAUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 E ERIE STREET
 City CHICAGO State IL Zip Code 60611-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **DRIEHAUS CAPITAL MANAGEMENT** Occupation: **FOUNDER/C.E.O.**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **32400.00**

Date of Receipt: **12 / 31 / 2013**
Transaction ID : SA11.15401452A
 Amount of Each Receipt this Period: **64800.00**
CONTRIBUTION
[MEMO ITEM]
SEE REDESIGNATION

SUBTOTAL of Receipts This Page (optional)..... **10100.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD H. DRIEHAUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 E ERIE STREET
 City CHICAGO State IL Zip Code 60611-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DRIEHAUS CAPITAL MANAGEMENT Occupation FOUNDER/C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 02 / 14 / 2014
Transaction ID : SA11.15401452B
 Amount of Each Receipt this Period -32400.00
 CONTRIBUTION
[MEMO ITEM]
 REDESIGNATION TO RECOUNT FUND

B. PATRICIA DUCKETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2010 JIMMY DURANTE BLVD STE 10
 City DEL MAR State CA Zip Code 92014-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331177
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. PATRICIA DUCKETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2010 JIMMY DURANTE BLVD STE 10
 City DEL MAR State CA Zip Code 92014-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15367883
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 101 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PATRICIA DUCKETT
 Mailing Address 2010 JIMMY DURANTE BLVD STE 10
 City State Zip Code
 DEL MAR CA 92014-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE NONE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379585
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CHESTER A. DYRUD
 Mailing Address 12903 BLACK OAK DR.
 City State Zip Code
 LAUREL MD 20708-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383729
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. WESLEY H. EATON
 Mailing Address 304 BROOKSBY VILLAGE DR UNIT 308
 City State Zip Code
 PEABODY MA 01960-8583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356691
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MRS. LOIS S. EDGERLY		Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11.15362439
Mailing Address 32 HIGHLAND ST.		Amount of Each Receipt this Period 107.00
City CAMBRIDGE	State MA	Zip Code 02138-2210
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.00	

Full Name (Last, First, Middle Initial) B. MRS. LOIS S. EDGERLY		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11.15363032
Mailing Address 32 HIGHLAND ST.		Amount of Each Receipt this Period 100.00
City CAMBRIDGE	State MA	Zip Code 02138-2210
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.00	

Full Name (Last, First, Middle Initial) C. DR. MARK T. EDNEY		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11.15363170
Mailing Address 519 N. PINEHURST AVENUE		Amount of Each Receipt this Period 2000.00
City SALISBURY	State MD	Zip Code 21801-6111
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer PENNISULA UROLOGY ASSOCIATES	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2207.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 103 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. CHARLES H. EICHENBERGER

Mailing Address 1765 TRIGG RD

City State Zip Code
 FERNDALE WA 98248-9383

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 358.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15367695

Amount of Each Receipt this Period
 157.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. DONALD ELLENBURG

Mailing Address 2121 HIGHLAND AVE

City State Zip Code
 KNOXVILLE TN 37916-1111

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

Name of Employer Occupation
 SELF-EMPLOYED PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 851.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15342252

Amount of Each Receipt this Period
 1.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DR. DONALD ELLENBURG

Mailing Address 2121 HIGHLAND AVE

City State Zip Code
 KNOXVILLE TN 37916-1111

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

Name of Employer Occupation
 SELF-EMPLOYED PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 851.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15342604

Amount of Each Receipt this Period
 850.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1008.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PATRICK J. ELLINGSWORTH

Mailing Address 6300 GREEN RANCH CIR.

City	State	Zip Code
RENO	NV	89519-6317

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2014

Transaction ID : SA11.15360687

Amount of Each Receipt this Period

260.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ERICA ELLIOT

Mailing Address 1103 EAST CAPITOL STREET SE APT 4

City	State	Zip Code
WASHINGTON	DC	20003-1435

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

Name of Employer	Occupation
CROWELL AND MORING	LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15381562

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. WING YUNG CHOY EMERY

Mailing Address 2333 KAPIOLANI BLVD
APT 2014

City	State	Zip Code
HONOLULU	HI	96826-4444

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15358997

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	761.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. WING YUNG CHOY EMERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2333 KAPIOLANI BLVD
 APT 2014
 City HONOLULU State HI Zip Code 96826-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **226.00**

Date of Receipt **02 / 21 / 2014**
Transaction ID : SA11.15374437
 Amount of Each Receipt this Period **150.00**
 CONTRIBUTION

B. CALVIN ERICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1519 SILVER LAKE DRIVE
 City NORCROSS State GA Zip Code 30093-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **265.00**

Date of Receipt **02 / 03 / 2014**
Transaction ID : SA11.15331016
 Amount of Each Receipt this Period **165.00**
 CONTRIBUTION

C. CALVIN ERICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1519 SILVER LAKE DRIVE
 City NORCROSS State GA Zip Code 30093-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **265.00**

Date of Receipt **02 / 11 / 2014**
Transaction ID : SA11.15356063
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **415.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. JAMES L. ERVIN

Mailing Address 116 QUEEN STREET

City State Zip Code
ALEXANDRIA VA 22314-2611

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

Name of Employer Occupation
ERVIN HILL STRATEGIES PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11.15385496

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. BARBARA L. ESKRIDGE

Mailing Address 3216 ROCK HOLLOW RD

City State Zip Code
OKLAHOMA CITY OK 73120-1928

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014
Transaction ID : SA11.15331181

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. WELDON L. EVANS

Mailing Address 517 SOUTHWEST DR

City State Zip Code
WARRENSBURG MO 64093-3021

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014
Transaction ID : SA11.15379557

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1900.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 107 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM B. EWING JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 4235
 City State Zip Code
 CORPUS CHRISTI TX 78469-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EWING CONSTRUCTION COMPANY INC. PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388818
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

B. SIMON EYLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 748 ARLINGTON ST
 City State Zip Code
 HOUSTON TX 77007-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RIO ENERGY OIL TRADER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15346458
 Amount of Each Receipt this Period
 501.00
 CONTRIBUTION

C. CHARLES P. FABER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4292 COUNTY P
 City State Zip Code
 RHINELANDER WI 54501-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360182
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 33151.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 108 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD E. FAGGIOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 377 MERK RD
 City WATSONVILLE State CA Zip Code 95076-0515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALTO CORRALITOS RANCH Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 16 / 2014
Transaction ID : SA11.15362334
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

B. DR. ANGELA S. FANELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5981 ATKINSON RD.
 City NEW HOPE State PA Zip Code 18938-5301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INTERNATIONAL COMMERCIAL INVES Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331191
 Amount of Each Receipt this Period 400.00
 CONTRIBUTION

C. MR. LAWRENCE C. FARNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1226 PEBBLE SPGS
 City PRESCOTT State AZ Zip Code 86301-4469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15368809
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 109 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DR PETER FARRELL

Mailing Address 7220 ROMERO DRIVE

City State Zip Code
LA JOLLA CA 92037-5633

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

Name of Employer Occupation
RESMED INC. CHAIRMAN & FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 / /
Transaction ID : SA11.15376417

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. WILLIAM JAMES FARRELL

Mailing Address 9511 STOCKPORT DR.

City State Zip Code
SPRING TX 77379-6539

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 / /
Transaction ID : SA11.15346756

Amount of Each Receipt this Period
101.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. WILLIAM JAMES FARRELL

Mailing Address 9511 STOCKPORT DR.

City State Zip Code
SPRING TX 77379-6539

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 / /
Transaction ID : SA11.15383436

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1201.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. CHARLES L. FEENEY		Date of Receipt
Mailing Address 2501 30TH AVENUE APARTMENT 202		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
FARGO	ND	58103-6128
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15343606
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. MRS. PAMELA FENLON		Date of Receipt
Mailing Address PO BOX 26289		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCHESTER	NY	14626-0289
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15331650
Name of Employer	Occupation	Amount of Each Receipt this Period
LAYER 3 TECHNOLOGIES, INC.	CEO	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="201.00"/>	

Full Name (Last, First, Middle Initial) C. MR. GILBERT P. FERREY		Date of Receipt
Mailing Address 1082 GRIZZLY PEAK BLVD		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
BERKELEY	CA	94708-1547
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15346247
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	REAL ESTATE MANAGEMENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JAMES E. FERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 10601 MISSION ROAD SUITE 350
 DO NO CONTACT
 City LEAWOOD State KS Zip Code 66206-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FERRELLGAS PARTNERS Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385498
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

B. MRS. CLAIRE E. FIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3373 HADFIELD GREENE
 City SARASOTA State FL Zip Code 34235-5100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376518
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MR. FRANK FINELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1012 FOUNDERS RIDGE LANE
 City MCLEAN State VA Zip Code 22102-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE CARLYLE GROUP Occupation BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385505
 Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	34000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. GLORIA M. FINK
Full Name (Last, First, Middle Initial)

Mailing Address 1107 CABRIOLET BLVD.

City AUBURN State IN Zip Code 46706-1332

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355723

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

B. MR. ANTHONY FIORELLO
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 285

City TOTOWA State NJ Zip Code 07511-0285

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

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15346249

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. GENE FISCARELLI
Full Name (Last, First, Middle Initial)

Mailing Address 5020 W MOCKINGBIRD LN.

City MC NEAL State AZ Zip Code 85617-9677

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 502.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361328

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ALFRED H. FISCHER

Mailing Address P.O. BOX 926

City State Zip Code
ABERDEEN MS 39730-0926

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

Name of Employer Occupation
SELF-EMPLOYED FARM MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366674

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. RONALD M. FISH

Mailing Address 19 COBBLESTONE PL

City State Zip Code
MERRIMACK NH 03054-2300

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

Name of Employer Occupation
STARFISH SERVICE SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
551.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356687

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. RONALD M. FISH

Mailing Address 19 COBBLESTONE PL

City State Zip Code
MERRIMACK NH 03054-2300

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

Name of Employer Occupation
STARFISH SERVICE SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
551.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15357565

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. MARTIN J. FISHER

Mailing Address 1680 SW 86TH ST.

City State Zip Code
OKLAHOMA CITY OK 73159-6229

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

Name of Employer Occupation
US COMMUNICATIONS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA11.15373647

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. ROBERT D. FISHER

Mailing Address 727 S FLORIDA AVE

City State Zip Code
DELAND FL 32720-6825

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2014
Transaction ID : SA11.15345154

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ROBERT D. FISHER

Mailing Address 727 S FLORIDA AVE

City State Zip Code
DELAND FL 32720-6825

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014
Transaction ID : SA11.15374469

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 630.00

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

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

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

FOR LINE NUMBER: PAGE 115 OF 637
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. MARY L. FORMATO
Full Name (Last, First, Middle Initial)
Mailing Address 77 7TH AVENUE APT 21C

City NEW YORK	State NY	Zip Code 10011-6644
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15367129

Amount of Each Receipt this Period
260.00

CONTRIBUTION

B. MR. JOHN M. FOSTER
Full Name (Last, First, Middle Initial)
Mailing Address 1348 PEPPER TREE DR.

City HEMET	State CA	Zip Code 92545-8149
---------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15368228

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. MR. JOHN M. FOSTER
Full Name (Last, First, Middle Initial)
Mailing Address 1348 PEPPER TREE DR.

City HEMET	State CA	Zip Code 92545-8149
---------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014
Transaction ID : SA11.15374378

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	560.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 116 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. JOHN M. FOSTER

Mailing Address 1348 PEPPER TREE DR.

City State Zip Code
HEMET CA 92545-8149

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15376828

Amount of Each Receipt this Period
225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MICHAEL FOUST

Mailing Address 3 ALVERNO CT

City State Zip Code
REDWOOD CITY CA 94061-1825

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

Name of Employer Occupation
DIGITAL REALTY TRUST REAL ESTATE INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11.15362420

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. BILL C. FOX

Mailing Address 202 BAHIA PT

City State Zip Code
NAPLES FL 34103-3511

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383174

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 925.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MICHAEL E. FRANCE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1679

City NOKOMIS	State FL	Zip Code 34274-1679
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340369

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MR. DAVID R. FRAUENSHUH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6401 INDIAN HILLS ROAD

City EDINA	State MN	Zip Code 55439-1133
---------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation OWNER
-----------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359882

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. MR. DAVID R. FRAUENSHUH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6401 INDIAN HILLS ROAD

City EDINA	State MN	Zip Code 55439-1133
---------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation OWNER
-----------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359889

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MICHAEL FREEDMAN		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15392723
Mailing Address 2022 COLUMBIA RD APT 301		Amount of Each Receipt this Period -250.00
City WASHINGTON	State DC	Zip Code 20009-1350
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer GELMAN, ROSENBERG & FREEDMAN	Occupation CPA	CHARGED BACK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. MR. JERRY B. FULMER		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15377509
Mailing Address 2669 CEDARVUE DRIVE		Amount of Each Receipt this Period 500.00
City PITTSBURGH	State PA	Zip Code 15241-2911
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. MARILYN FULTON		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11.15373306
Mailing Address 1000 GLORIETTA BLVD		Amount of Each Receipt this Period 250.00
City CORONADO	State CA	Zip Code 92118-2308
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 119 OF 637
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. GRACE S. GAGNIER
Full Name (Last, First, Middle Initial)
Mailing Address 845 LAUREL AVE

City BELMONT	State CA	Zip Code 94002-2323
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SA11.15362613

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. MS. GRACE S. GAGNIER
Full Name (Last, First, Middle Initial)
Mailing Address 845 LAUREL AVE

City BELMONT	State CA	Zip Code 94002-2323
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15377507

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. KARI JACOBSEN GAGNOW
Full Name (Last, First, Middle Initial)
Mailing Address W3632 SCHUSTER LANE

City MALONE	State WI	Zip Code 53049-1609
----------------	-------------	------------------------

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

Name of Employer SARGENTO FOODS INC	Occupation FOOD SCIENTIST
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15352550

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	451.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 120 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOSEPH J. GAMBERT JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 WEST ST
 City TRENTON State NJ Zip Code 08611-1146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVOST MARSHAL US ARMY Occupation US ARMY CLINICAL INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15371782
 Amount of Each Receipt this Period 135.00
 CONTRIBUTION

B. MR. GUILLERMO GARCIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 9401 SW 103RD ST
 City MIAMI State FL Zip Code 33176-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15385080
 Amount of Each Receipt this Period 75.00
 CONTRIBUTION

C. SYLVIA A. GARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 566 BALDWIN BRANCH CHURCH RD
 City ELIZABETHTOWN State NC Zip Code 28337-5344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15339068
 Amount of Each Receipt this Period 60.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 121 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. SYLVIA A. GARNER

Mailing Address 566 BALDWIN BRANCH CHURCH RD

City State Zip Code
 ELIZABETHTOWN NC 28337-5344

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374885

Amount of Each Receipt this Period
 150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. VIRGINIA L. GAYLORD

Mailing Address 430 N VINEDO AVE

City State Zip Code
 PASADENA CA 91107-2615

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

Name of Employer Occupation
 HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350252

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. VIRGINIA L. GAYLORD

Mailing Address 430 N VINEDO AVE

City State Zip Code
 PASADENA CA 91107-2615

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

Name of Employer Occupation
 HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371321

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER: PAGE 122 OF 637
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. GREGORY GELLERT

Mailing Address 38330 LAKESHORE DR

City	State	Zip Code
HARRISON TOWNSHIP	MI	48045-2859

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

Name of Employer	Occupation
MS CIS	ADJUDICATION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
466.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	12	/	2014

Transaction ID : SA11.15361311

Amount of Each Receipt this Period
155.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. GREGORY GELLERT

Mailing Address 38330 LAKESHORE DR

City	State	Zip Code
HARRISON TOWNSHIP	MI	48045-2859

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

Name of Employer	Occupation
MS CIS	ADJUDICATION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
466.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15369468

Amount of Each Receipt this Period
155.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. SAM GENIRBERG

Mailing Address 1707 ARLINGTON BLVD

City	State	Zip Code
EL CERRITO	CA	94530-2005

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	07	/	2014

Transaction ID : SA11.15346762

Amount of Each Receipt this Period
225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	535.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. LARRY GESKE
Full Name (Last, First, Middle Initial)

Mailing Address 4704 E FLOSSMOOR CIRCLE

City	State	Zip Code
MESA	AZ	85206-2731

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SA11.15337476

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. MR. JOSEPH H. GIBSON
Full Name (Last, First, Middle Initial)

Mailing Address 5040 GLENBROOK TERRACE NW

City	State	Zip Code
WASHINGTON	DC	20016-2602

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

Name of Employer	Occupation
GIBSON GROUP LLC	ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15385497

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. MS. ROSALIN A. GILBERT
Full Name (Last, First, Middle Initial)

Mailing Address 860 HILLWELL ROAD

City	State	Zip Code
CHESAPEAKE	VA	23322-3837

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2014

Transaction ID : SA11.15355101

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JEROME H. GILL
Full Name (Last, First, Middle Initial)

Mailing Address 7407 N 83RD DR

City GLENDALE	State AZ	Zip Code 85305-3903
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2014

Transaction ID : SA11.15343612

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. MR. JEROME H. GILL
Full Name (Last, First, Middle Initial)

Mailing Address 7407 N 83RD DR

City GLENDALE	State AZ	Zip Code 85305-3903
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SA11.15346795

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. MR. JEROME H. GILL
Full Name (Last, First, Middle Initial)

Mailing Address 7407 N 83RD DR

City GLENDALE	State AZ	Zip Code 85305-3903
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15384742

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	301.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 125 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. J. KEVIN GILLIGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5804 CRESCENT TERRACE
 City State Zip Code
 EDINA MN 55436-1319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CAPELLA EDUCATION COMPANY CEO
 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
 02 / 28 / 2014
Transaction ID : SA11.15388835
 Amount of Each Receipt this Period
 10000.00
 CONTRIBUTION

B. MR. JOSEPH A. GIORDANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 LEWISVILLE CT
 City State Zip Code
 PHOENIXVILLE PA 19460-2857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ANTHONY CORP APT MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366395
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. MR. JOSEPH A. GIORDANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 LEWISVILLE CT
 City State Zip Code
 PHOENIXVILLE PA 19460-2857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ANTHONY CORP APT MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15389930
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. RYAN GISOLFI

Mailing Address **12 MILLS STREET**

City **NORWALK** State **CT** Zip Code **06850-2006**

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

Name of Employer **ELITE TRAINING CONCEPTS LLC** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15352091

Amount of Each Receipt this Period
35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AARLYN GLENN

Mailing Address **21351 CANEA**

City **MISSION VIEJO** State **CA** Zip Code **92692-4992**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15354973

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. JUNE RUSSEL GLENNON

Mailing Address **5191 E LAKESIDE DR.**

City **PALM SPRINGS** State **CA** Zip Code **92264-5912**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
02 / 26 / 2014
Transaction ID : SA11.15380597

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **235.00**

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

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

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

FOR LINE NUMBER: PAGE 127 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. JUNE RUSSEL GLENN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5191 E LAKESIDE DR.
 City PALM SPRINGS State CA Zip Code 92264-5912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15382644
 Amount of Each Receipt this Period 51.00
 CONTRIBUTION

B. MR. ROBERT C. GLENN
 Full Name (Last, First, Middle Initial)
 Mailing Address 13240 N TATUM BLVD APT 204
 City PHOENIX State AZ Zip Code 85032-6474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 477.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374474
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

C. MR. ROBERT C. GLENN
 Full Name (Last, First, Middle Initial)
 Mailing Address 13240 N TATUM BLVD APT 204
 City PHOENIX State AZ Zip Code 85032-6474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 477.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376562
 Amount of Each Receipt this Period 125.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 326.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DONALD J. GLIDEWELL
Full Name (Last, First, Middle Initial)

Mailing Address 653 MCALLISTER DR.

City BENICIA	State CA	Zip Code 94510-3995
-----------------	-------------	------------------------

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

Name of Employer MARRONE BIO INNOVATION	Occupation C.F.O.
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15380592

Amount of Each Receipt this Period
450.00

CONTRIBUTION

B. MR. THOMAS N. GODFREY
Full Name (Last, First, Middle Initial)

Mailing Address 950 COUNTY RD. QQ APT. 152

City WAUPACA	State WI	Zip Code 54981-8279
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	06	/	2014

Transaction ID : SA11.15341083

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. DANIEL GOELZER
Full Name (Last, First, Middle Initial)

Mailing Address 5941 SEARL TER

City BETHESDA	State MD	Zip Code 20816-2022
------------------	-------------	------------------------

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

Name of Employer BAKER & MCKENZIE	Occupation ATTORNEY
--------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15357470

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 637
<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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. LAURENCE GOLDFARB
Full Name (Last, First, Middle Initial)

Mailing Address 11 GRACE AVENUE, SUITE 405

City GREAT NECK	State NY	Zip Code 11021-2417
--------------------	-------------	------------------------

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

Name of Employer LAURAND ASSOCIATES	Occupation COMMODITIES
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15381697

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. MR. GARY S. GOLDSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 161 BUXTON RD.

City BEDFORD HILLS	State NY	Zip Code 10507-2310
-----------------------	-------------	------------------------

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

Name of Employer WHITNEY GROUP LLC	Occupation CEO
---------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2014

Transaction ID : SA11.15331192

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. MR. DAVID S. GOLTERMANN
Full Name (Last, First, Middle Initial)

Mailing Address 746 CHIDESTER AVE.

City GLEN ELLYN	State IL	Zip Code 60137-3957
--------------------	-------------	------------------------

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

Name of Employer KI INDUSTRIES, INC.	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15379451

Amount of Each Receipt this Period

32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	33150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. CHARLES F. GORDER SR.
Full Name (Last, First, Middle Initial)

Mailing Address 5526 TOYON RD

City SAN DIEGO State CA Zip Code 92115-1020

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

Name of Employer LORENE ETAL Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361296

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. BRUCE M. GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 225 THE CROSSROADS 255

City CARMEL State CA Zip Code 93923-8674

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15351904

Amount of Each Receipt this Period
 75.00

CONTRIBUTION

C. BRUCE M. GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 225 THE CROSSROADS 255

City CARMEL State CA Zip Code 93923-8674

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371870

Amount of Each Receipt this Period
 75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 131 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MARGIE GORE
 Mailing Address 819 CHICAGO ST
 City State Zip Code
 DALHART TX 79022-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15338781
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JOHN A. GOSE
 Mailing Address 5500 SW SPOKANE ST
 City State Zip Code
 SEATTLE WA 98116-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WASHINGTON STATE ATTORNEY GOVERNMENT EMPLOYEE
 GENERAL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15372551
 Amount of Each Receipt this Period
 110.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. MARJORIE GRAHAM
 Mailing Address 100 TIMBERLEAF CIR
 City State Zip Code
 ALABASTER AL 35007-4129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15346217
 Amount of Each Receipt this Period
 107.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 467.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. MARJORIE GRAHAM
Full Name (Last, First, Middle Initial)

Mailing Address 100 TIMBERLEAF CIR

City ALABASTER State AL Zip Code 35007-4129

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374781

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. MARGARET G. GRANBERRY
Full Name (Last, First, Middle Initial)

Mailing Address 3369 DARBY RD

City KESWICK State VA Zip Code 22947-2706

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15338262

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MS. ALYSON GRASSO
Full Name (Last, First, Middle Initial)

Mailing Address 311 WEST BROADWAY, APT 7E

City NEW YORK State NY Zip Code 10013-3058

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

Name of Employer NONE Occupation NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 707.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15368001

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. MILTON T. GRAVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 POTOMAC DR
 City HOUSTON State TX Zip Code 77057-1923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COCKRELL INTEREST Occupation SENIOR ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15380716
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MS. SUSANNAH GRAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 CENTRAL PARK WEST, 8A
 City NEW YORK State NY Zip Code 10023-6296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROYALTY PHARMACY Occupation EXECUTIVE VP & CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 2600.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15388822
 Amount of Each Receipt this Period 2600.00
 CONTRIBUTION

C. MR. CLYDE H. GREEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2929 BELVEDERE AVE
 City CHARLOTTE State NC Zip Code 28205-3707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 223.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15371718
 Amount of Each Receipt this Period 60.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JEFFREY A. GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 6333 LENOX ROAD

City State Zip Code
BETHESDA MD 20817-6023

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

Name of Employer Occupation
JA GREEN AND COMPANY GOVERNMENT RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11.15385501

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

B. PAUL GREENWALT
Full Name (Last, First, Middle Initial)

Mailing Address 375 CONESTOGA WAY
UNIT 3414

City State Zip Code
HENDERSON NV 89002-1104

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014
Transaction ID : SA11.15338691

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. MR. RUSSELL J. GREENBERG
Full Name (Last, First, Middle Initial)

Mailing Address 15 MICHAELS WAY

City State Zip Code
WESTON CT 06883-1600

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

Name of Employer Occupation
ALTUS CAPITAL PARTNERS INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014
Transaction ID : SA11.15343746

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 135 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RUSSELL J. GREENBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 MICHAELS WAY
 City WESTON State CT Zip Code 06883-1600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALTUS CAPITAL PARTNERS Occupation INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 23 / 2014
Transaction ID : SA11.15373465
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MS. MARIE GREGORY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2125 HIGHWAY 14 EAST
 City LANDRUM State SC Zip Code 29356-9777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15355005
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. MR. DAVID GRENADER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4708 CAROLINE STREET
 City HOUSTON State TX Zip Code 77004-5025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15373476
 Amount of Each Receipt this Period 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JACKIE W. GRIFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1612

City STILLWATER	State OK	Zip Code 74076-1612
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375573

Amount of Each Receipt this Period
 150.00

CONTRIBUTION

B. MR. JACKIE W. GRIFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1612

City STILLWATER	State OK	Zip Code 74076-1612
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384235

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. MR. RICHARD S. GRIFFITH
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610

City LAFAYETTE	State LA	Zip Code 70509-1610
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11.15362308

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 137 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD S. GRIFFITH
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610
 City LAFAYETTE State LA Zip Code 70509-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15376425
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. RICHARD S. GRIFFITH
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610
 City LAFAYETTE State LA Zip Code 70509-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378462
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MR. RICHARD S. GRIFFITH
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610
 City LAFAYETTE State LA Zip Code 70509-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379454
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ANNIE GRIMNER

Mailing Address 1255 HOEHNE RD

City CUERO	State TX	Zip Code 77954-2506
---------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SA11.15344461

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ANNIE GRIMNER

Mailing Address 1255 HOEHNE RD

City CUERO	State TX	Zip Code 77954-2506
---------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15371265

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ANNIE GRIMNER

Mailing Address 1255 HOEHNE RD

City CUERO	State TX	Zip Code 77954-2506
---------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

Transaction ID : SA11.15374425

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	810.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ANNIE GRIMNER
Full Name (Last, First, Middle Initial)

Mailing Address 1255 HOEHNE RD

City CUERO State TX Zip Code 77954-2506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379609

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

B. ANNIE GRIMNER
Full Name (Last, First, Middle Initial)

Mailing Address 1255 HOEHNE RD

City CUERO State TX Zip Code 77954-2506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15380796

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

C. MRS. MARGARET T. GROHNE
Full Name (Last, First, Middle Initial)

Mailing Address 25907 MURPHY ROAD

City WILMINGTON State IL Zip Code 60481-8340

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376771

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 33100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. REX A. GROSS		Date of Receipt
Mailing Address 2408 TULLAMORE LN		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City State Zip Code AMES IA 50010-9600		Transaction ID : SA11.15359847
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation CHEMORSE SALES		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>

Full Name (Last, First, Middle Initial) B. MR. DONALD L. GROVER		Date of Receipt
Mailing Address 312 OLIVER ST APT 2		<input type="text" value="02"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code CORYDON IN 47112-5381		Transaction ID : SA11.15373290
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="201.00"/>

Full Name (Last, First, Middle Initial) C. MS. BEATRICE J. GRUBBS		Date of Receipt
Mailing Address 550 RIOMAR DR. APT. 33		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City State Zip Code VERO BEACH FL 32963-2021		Transaction ID : SA11.15342365
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="201.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 141 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOSEPH A. GUDKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 7610 WHITE OAK DRIVE
 City LAGO VISTA State TX Zip Code 78645-4628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15352462
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. HURSHEL D. GUEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 88926 550 AVE
 City CROFTON State NE Zip Code 68730-4046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374402
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. REV. FANNALOU GUGGISBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 21017 N 125TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15355718
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DICK GUIDRY

Mailing Address P.O. BOX 1027

City State Zip Code
GALLIANO LA 70354-1027

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

Name of Employer Occupation
GUIDRY BROTHERS TOWING CO. PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15384981

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. THOMAS F. GUMPRECHT

Mailing Address 8301 161ST AVE NE STE 200

City State Zip Code
REDMOND WA 98052-3858

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15365671

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JOSEPH F. GUNTHER

Mailing Address 6 SENECA RD

City State Zip Code
SEA RANCH LAKES FL 33308-2326

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

Name of Employer Occupation
GUNTHER MOTOR CO AUTO DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
801.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15365729

Amount of Each Receipt this Period
801.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1601.00

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

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

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

FOR LINE NUMBER: PAGE 143 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD X. GUTHMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1567 HEATHERS COVE RD.
 City HIAWASSEE State GA Zip Code 30546-1656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15345360
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

B. MR. DAVID HABER
 Full Name (Last, First, Middle Initial)
 Mailing Address 431 CASSEL RD.
 City EATON State OH Zip Code 45320-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 01 / 2014
Transaction ID : SA11.15330952
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. MR. DAVID HABER
 Full Name (Last, First, Middle Initial)
 Mailing Address 431 CASSEL RD.
 City EATON State OH Zip Code 45320-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 07 / 2014
Transaction ID : SA11.15348804
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DAVID HABER

Mailing Address 431 CASSEL RD.

City EATON	State OH	Zip Code 45320-9518
---------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

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

Transaction ID : SA11.15362489

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MONTAGUE H. HACKETT JR. .

Mailing Address 550 PARK AVE

City NEW YORK	State NY	Zip Code 10065-7369
------------------	-------------	------------------------

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

Name of Employer VICTORY VENTURES LLC	Occupation INVESTMENTS
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15384157

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. CHARLES A. HAEGELIN

Mailing Address 11025 GREENVIEW NE

City ALBUQUERQUE	State NM	Zip Code 87111-7411
---------------------	-------------	------------------------

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

Name of Employer CURB INC	Occupation LAND DEVELOPER
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15363033

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 145 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT W. HAGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 NORCROSS STREET
 SUITE 50
 City ROSWELL State GA Zip Code 30075-3864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STERLING HEALTH CARE Occupation C E O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15379457
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. MR. DAVID HALE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 75224
 City FAIRBANKS State AK Zip Code 99707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HALE AND ASSOCIATES Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15379628
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. JEREMY HALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6377 S. Y LIGHTNING RANCH ROAD
 City HEREFORD State AZ Zip Code 85615-9500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US ARMY Occupation VETERAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15341359
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PAULI HALL

Mailing Address 64362 BRIDGER R

City HOMER State AK Zip Code 99603-9213

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 12 / 2014
Transaction ID : SA11.15361994

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. ELLING HALVORSON

Mailing Address 12515 WILLOWS ROAD NE, STE. 200

City KIRKLAND State WA Zip Code 98034-8795

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

Name of Employer Occupation
MONARCH ENTERPRISES INC. PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 28 / 2014
Transaction ID : SA11.15388807

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. THEODORE F. HAMMER

Mailing Address P.O. BOX 182

City GLENN DALE State MD Zip Code 20769-0182

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

Name of Employer Occupation
NASA/GODDARD SPACE FLIGHT CENTER AEROSPACE ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt
02 / 11 / 2014
Transaction ID : SA11.15355627

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00

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

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

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

FOR LINE NUMBER: PAGE 147 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID R. HAMRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 6603 BARRINGTON GRN
 City HOUSTON State TX Zip Code 77069-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11.15362595
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MR. RICHARD L. HANCHETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 19775 TANGLEWOOD
 City BIG RAPIDS State MI Zip Code 49307-9468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369405
 Amount of Each Receipt this Period
 1800.00
 CONTRIBUTION

C. MRS. ROSEMARY D. HARDART
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 WESTBOURNE APT 4A
 City BRONXVILLE State NY Zip Code 10708-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15380974
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. VIRANES R. HARDING
 Full Name (Last, First, Middle Initial)
 Mailing Address 370 MCKENZIE GRACE LN
 City GRAYSON State GA Zip Code 30017-7825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377541
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. JOHN H. HARLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 4570 GLIODEN DRIVE
 City STURGEON BAY State WI Zip Code 54235-9195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15382914
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. JOHN H. HARLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 HUNTER DR
 City VENICE State FL Zip Code 34285-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377465
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 149 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. J. KERN HARMILTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 BLOSSOM HILL RD UNIT E324
 City State Zip Code
 LOS GATOS CA 95032-3568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344836
 Amount of Each Receipt this Period
 201.00
 CONTRIBUTION

B. MR. MARK HARMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1321 CLYDESDALE AVE
 City State Zip Code
 WELLINGTON FL 33414-1036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GLOBAL LEISURE PARTNERS LLC MERCHANT BANKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15390098
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. DONALD W. HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1812 NAVY ST.
 City State Zip Code
 SANTA MONICA CA 90405-5944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MENTAL HEALTH MANAGEMENT, INC. CORPORATE CED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 407.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379559
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 651.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 150 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. FRED M. HARRIS

Mailing Address 541 THORNTON RD

City State Zip Code
 LITHIA SPRINGS GA 30122-1517

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

Name of Employer Occupation
 FRED'S BARBEQUE HOUSE INC. OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15348842

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JAMES L. HARRIS

Mailing Address 716 I AVE

City State Zip Code
 CORONADO CA 92118-2018

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340992

Amount of Each Receipt this Period
 225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DR. ROBERT H. HARRIS

Mailing Address 2137 ROUTE 35

City State Zip Code
 HOLMDEL NJ 07733-1083

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

Name of Employer Occupation
 HARRIS FRC CORPORATION CORPORATE EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373479

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 33025.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GREGG HARTLEY
Full Name (Last, First, Middle Initial)

Mailing Address 857 CEDAR DRIVE

City DEALE	State MD	Zip Code 20751-9613
---------------	-------------	------------------------

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

Name of Employer CASSIDY & ASSOCIATES	Occupation CHIEF OPERATING OFFICER & VICE CHAIR
--	--

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
02	/	26	/	2014

Transaction ID : SA11.15385499

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. MIKE HASKIN
Full Name (Last, First, Middle Initial)

Mailing Address 29 WOODSWETHER ROAD

City KANSAS CITY	State KS	Zip Code 66118-1132
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15358852

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. W. C. HATCHER
Full Name (Last, First, Middle Initial)

Mailing Address 3747 PEACHTREE RD NE APT 1523

City ATLANTA	State GA	Zip Code 30319-1332
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SA11.15344838

Amount of Each Receipt this Period
206.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2956.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 152 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. GREGORY HATZIS

Mailing Address 4403 LONESOME DEER CT

City State Zip Code
LONGVIEW TX 75604-0604

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

Name of Employer Occupation
CENTER FOR FACIAL ORAL AND IMPLANTS ORAL SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15367861

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. MAXINE S. HAUN

Mailing Address 9 RAINBOW RDG

City State Zip Code
IRVINE CA 92603-3728

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
426.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355645

Amount of Each Receipt this Period
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. MAXINE S. HAUN

Mailing Address 9 RAINBOW RDG

City State Zip Code
IRVINE CA 92603-3728

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
426.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15368412

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 675.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MRS. MAXINE S. HAUN		Date of Receipt
Mailing Address 9 RAINBOW RDG		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City State Zip Code IRVINE CA 92603-3728		Transaction ID : SA11.15374198
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="426.00"/>

Full Name (Last, First, Middle Initial) B. MRS. SUSAN W. HAVERFIELD		Date of Receipt
Mailing Address 48 16TH. ST. E		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code COLUMBIA FALLS MT 59912-4043		Transaction ID : SA11.15378512
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="210.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>

Full Name (Last, First, Middle Initial) C. MR. CHARLES HAYWARD		Date of Receipt
Mailing Address 2921 QUEENSWOOD RD		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code MIDLOTHIAN VA 23113-6305		Transaction ID : SA11.15383229
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="551.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="660.00"/>
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: (check only one)	PAGE 154 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. KIMBERLY HEAD
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 78

City MAYVILLE State NY Zip Code 14757-0078

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2014

Transaction ID : SA11.15372045

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. KIMBERLY HEAD
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 78

City MAYVILLE State NY Zip Code 14757-0078

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11.15374414

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. KIMBERLY HEAD
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 78

City MAYVILLE State NY Zip Code 14757-0078

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11.15382932

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. CHRIS HECK
Full Name (Last, First, Middle Initial)

Mailing Address 2250 NORTH SOUTHPORT AVE.

City CHICAGO	State IL	Zip Code 60614-3115
-----------------	-------------	------------------------

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

Name of Employer KIRKLAND & ELLIS LLP	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11.15348871

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. MR. DAVID J. HEERENSPERGER
Full Name (Last, First, Middle Initial)

Mailing Address 96 CASCADE KEY

City BELLEVUE	State WA	Zip Code 98006-1030
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385524

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

C. LT GEN ROLLAND V. HEISER
Full Name (Last, First, Middle Initial)

Mailing Address 4104 LAS PALMAS WAY

City SARASOTA	State FL	Zip Code 34238-4532
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15372030

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. SHERILYN HELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 SOUTH RUNYAN STREET
 City LA HABRA State CA Zip Code 90631-2093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350824
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MRS. KAYHAN HELLRIEGEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1711 LUDLOW RD
 City MARCO ISLAND State FL Zip Code 34145-6623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KEYHAN INTERNATIONAL PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15339795
 Amount of Each Receipt this Period
 110.00
 CONTRIBUTION

C. E. N. HENDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 SOUTHFIELD ROAD
 City SHREVEPORT State LA Zip Code 71106-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.1537641
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	660.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 157 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CHARLES HENDRY

Mailing Address 1604 SOUTHMONT DR

City State Zip Code
DALTON GA 30720-5175

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15368387

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CHARLES HENDRY

Mailing Address 1604 SOUTHMONT DR

City State Zip Code
DALTON GA 30720-5175

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15369352

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CHARLES HENDRY

Mailing Address 1604 SOUTHMONT DR

City State Zip Code
DALTON GA 30720-5175

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15370266

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. PETER FREDERICK HERSCEND
Full Name (Last, First, Middle Initial)

Mailing Address 538 OAK BLUFF ROAD

City BRANSON	State MO	Zip Code 65616-9110
-----------------	-------------	------------------------

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

Name of Employer H.F.E., INC.	Occupation EXECUTIVE
----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11.15373494

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. MR. MICHAEL H. HERSON
Full Name (Last, First, Middle Initial)

Mailing Address 8709 BURNING TREE ROAD

City BETHESDA	State MD	Zip Code 20817-3054
------------------	-------------	------------------------

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

Name of Employer AMERICAN DEFENSE INTERNATIONAL INC.	Occupation PRESIDENT
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15379456

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

C. MR. HENRY G. HERZING
Full Name (Last, First, Middle Initial)

Mailing Address 1660 N. PROSPECT AVENUE
UNIT 1009

City MILWAUKEE	State WI	Zip Code 53202-6706
-------------------	-------------	------------------------

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

Name of Employer HERZING UNIVERSITY	Occupation PRESIDENT
--	-------------------------

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
02	/	25	/	2014

Transaction ID : SA11.15379444

Amount of Each Receipt this Period
10000.00

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 159 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. WILLIAM O. HEYN		Date of Receipt MM / DD / YYYY 02 / 03 / 2014 Transaction ID : SA11.15331540
Mailing Address 2010 IMPERIAL GOLF COURSE BLVD DO NOT MAIL		Amount of Each Receipt this Period -100.00
City NAPLES	State FL	Zip Code 34110-1081
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	CHARGED BACK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. MR. PETER N. HIEBERT		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15379455
Mailing Address 3207 ROLLING ROAD		Amount of Each Receipt this Period 1000.00
City CHEVY CHASE	State MD	Zip Code 20815-4035
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer WINSTON STRAWN	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MR. GARRY HINKEL		Date of Receipt MM / DD / YYYY 02 / 03 / 2014 Transaction ID : SA11.15331157
Mailing Address 117 PATS CT		Amount of Each Receipt this Period 207.00
City WEATHERFORD	State TX	Zip Code 76087-7782
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer ENBRIDGE GT	Occupation AUTOMATION TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional).....▶	1107.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 160 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JANIE HINSON
Full Name (Last, First, Middle Initial)

Mailing Address 914 EL DORADO DR

City DOTHAN State AL Zip Code 36303-2421

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

Name of Employer WDHN Occupation GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11.15362432

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. MR. VAN D. HIPPI JR.
Full Name (Last, First, Middle Initial)

Mailing Address 809 N. QUAKER LANE

City ALEXANDRIA State VA Zip Code 22302-3416

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

Name of Employer AMERICAN DEFENSE INTL, INC. Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 02 / 20 / 2014
Transaction ID : SA11.15376772

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

C. MR. DAVID W. HOBBS
Full Name (Last, First, Middle Initial)

Mailing Address 1903 MALLINSON WAY SUITE 601

City ALEXANDRIA State VA Zip Code 22308-2760

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

Name of Employer THE HOBBS GROUP Occupation PUBLIC AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 05 / 2014
Transaction ID : SA11.15337385

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. JACK H. HOBBS		Date of Receipt MM / DD / YYYY 02 / 27 / 2014 Transaction ID : SA11.15381278
Mailing Address 3004 BERTRAM ST		Amount of Each Receipt this Period 105.00
City CHESAPEAKE	State VA	Zip Code 23323-1161
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer BAF	Occupation ELECTRICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

Full Name (Last, First, Middle Initial) B. MS. OLIVIA L. HOCKING		Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11.15361533
Mailing Address 225 20TH AVE NW		Amount of Each Receipt this Period 60.00
City BIRMINGHAM	State AL	Zip Code 35215-3441
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

Full Name (Last, First, Middle Initial) C. MS. OLIVIA L. HOCKING		Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11.15366512
Mailing Address 225 20TH AVE NW		Amount of Each Receipt this Period 60.00
City BIRMINGHAM	State AL	Zip Code 35215-3441
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. OLIVIA L. HOCKING
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 20TH AVE NW
 City BIRMINGHAM State AL Zip Code 35215-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **206.00**

Date of Receipt **02 / 26 / 2014**
Transaction ID : SA11.15379993
 Amount of Each Receipt this Period **25.00**
 CONTRIBUTION

B. MS. PATRICIA DIANA HOFERER
 Full Name (Last, First, Middle Initial)
 Mailing Address 40220 WALNUT ST
 City HEMET State CA Zip Code 92543-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **02 / 05 / 2014**
Transaction ID : SA11.15392728
 Amount of Each Receipt this Period **-40.00**
 CONTRIBUTION
 CHECK RETURNED BY BANK

C. RONALD RAY HOLDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1910 GULF SHORE BLVD. NORTH
 City NAPLES State FL Zip Code 34102-4696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15371387
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **235.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM F. HOLEKAMP
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 BARCLAY WOODS
 City ST. LOUIS State MO Zip Code 63124-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE HOLEKAMP COMPANY Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15385522
 Amount of Each Receipt this Period 32400.00
 CONTRIBUTION

B. JAMES HOLLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 CONER WAY
 City POOLER State GA Zip Code 31322-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15356717
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MR. JOSH C. HOLLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 825 SOUTH MONROE STREET
 City ARLINGTON State VA Zip Code 22204-1537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE PODESTA GROUP Occupation GOVERNMENT AND PUBLIC RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15379325
 Amount of Each Receipt this Period 1500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	34100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOANNE H. HOOK
Full Name (Last, First, Middle Initial)

Mailing Address 101 WESTCOTT ST. UNIT 1102

City HOUSTON	State TX	Zip Code 77007-7095
-----------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340598

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MRS. CAROLYN P. HOOPER
Full Name (Last, First, Middle Initial)

Mailing Address 13118 WINDBREAK RD.

City SAN DIEGO	State CA	Zip Code 92130-1821
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation INTERIOR DESIGNER
-----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375335

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. RUSSELL HOOVER
Full Name (Last, First, Middle Initial)

Mailing Address 5032 GOLDEN EAGLE

City GRAND PRAIRIE	State TX	Zip Code 75052-3056
-----------------------	-------------	------------------------

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

Name of Employer AIRBUS HELICOPTER	Occupation SENIOR AVIATION TECH
---------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331284

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. RUSSELL HOOVER
Full Name (Last, First, Middle Initial)

Mailing Address 5032 GOLDEN EAGLE

City GRAND PRAIRIE State TX Zip Code 75052-3056

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

Name of Employer AIRBUS HELICOPTER Occupation SENIOR AVIATION TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376572

Amount of Each Receipt this Period 25.00

CONTRIBUTION

B. MR. DAVID HOPKINS
Full Name (Last, First, Middle Initial)

Mailing Address 5 ORCHARD PLACE

City HARRISONVILLE State MO Zip Code 64701-3255

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

Name of Employer HOPKINS APPRAISAL Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11.15362427

Amount of Each Receipt this Period 350.00

CONTRIBUTION

C. MR. MILTON L. HOUSE
Full Name (Last, First, Middle Initial)

Mailing Address 124 WILLOWBROOK BLVD.

City LEWISBURG State PA Zip Code 17837-9343

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15364048

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 875.00

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

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

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

FOR LINE NUMBER: PAGE 166 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. BARBARA ANN HOVE
 Full Name (Last, First, Middle Initial)
 Mailing Address 17671 BEAR VALLEY ROAD
 City HESPERIA State CA Zip Code 92345-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROBAR ENTERPRISES Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15373502
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MR. GERALD R. HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1152 BELVEDERE CT NE
 City TOWNSEND State GA Zip Code 31331-3430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367084
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MR. BUD HOWE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 RANDI DR APT 107
 City AURORA State IL Zip Code 60504-4839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374407
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 637		
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. JAMES J. HRUSKA		Date of Receipt
Mailing Address 9021 S 83RD CT		MM / DD / YYYY 02 / 07 / 2014
City	State	Zip Code
HICKORY HILLS	IL	60457-1419
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11.15348206
Name of Employer	Occupation	Amount of Each Receipt this Period
MERCHANTS DISTRIBUTORS	ADMINISTRATIVE ASSISTANT	245.00
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	245.00	

Full Name (Last, First, Middle Initial) B. MS. JEANNETTE C. HUBBARD		Date of Receipt
Mailing Address 428 DARE RD		MM / DD / YYYY 02 / 21 / 2014
City	State	Zip Code
YORKTOWN	VA	23692-2903
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11.15374460
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	135.00
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	541.00	

Full Name (Last, First, Middle Initial) C. MR. STANLEY S. HUBBARD		Date of Receipt
Mailing Address 3415 UNIVERSITY AVENUE		MM / DD / YYYY 02 / 28 / 2014
City	State	Zip Code
SAINT PAUL	MN	55114-1019
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11.15388834
Name of Employer	Occupation	Amount of Each Receipt this Period
HUBBARD BROADCASTING INC.	OWNER	10000.00
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	10380.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 168 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. J. RICHARD HUDSON SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 MAGNOLIA AVE
 City State Zip Code
 FREDERICK MD 21701-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED LANDLORD
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15365650
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. J. RICHARD HUDSON SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 MAGNOLIA AVE
 City State Zip Code
 FREDERICK MD 21701-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED LANDLORD
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15365723
 Amount of Each Receipt this Period
 101.00
 CONTRIBUTION

C. SALLEE A. HUFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 E OCEAN BLVD UNIT 606
 City State Zip Code
 LONG BEACH CA 90802-6915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15354541
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 301.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 169 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHN HUGHETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 10403 HIGH HOLLOW DR #203
 City DALLAS State TX Zip Code 75230-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUGHETT ENGINEERING INC. Occupation ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2100.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15363171
 Amount of Each Receipt this Period **2000.00**
 CONTRIBUTION

B. MRS. SUZANNE HUGHES
 Full Name (Last, First, Middle Initial)
 Mailing Address 5316 TOPEKA DR
 City TARZANA State CA Zip Code 91356-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 17 / 2014**
Transaction ID : SA11.15362424
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

C. MRS. SOMPHON HULSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 301
 City ROCKY FACE State GA Zip Code 30740-0301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer QUINTON MEMORIAL Occupation NURSING HOME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **351.00**

Date of Receipt **02 / 06 / 2014**
Transaction ID : SA11.15340133
 Amount of Each Receipt this Period **50.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 170 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. SOMPHON HULSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 301
 City State Zip Code
 ROCKY FACE GA 30740-0301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 QUINTON MEMORIAL NURSING HOME
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 351.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376304
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. DON HURLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1175 HWY A1A #209
 City State Zip Code
 SATELLITE BEACH FL 32937-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331537
 Amount of Each Receipt this Period
 -500.00
 CONTRIBUTION
 CHARGED BACK

C. DAVE HUTTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 EAST 6TH STREET
 City State Zip Code
 MOSCOW ID 83843-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15339686
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 150.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. FRANK IANNA

Mailing Address 425 DEVONSHIRE DR.

City FRANKLIN LAKES	State NJ	Zip Code 07417-3023
------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379246

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CARY IVINS

Mailing Address 13849 SKYLINE HEIGHTS ROAD

City HERMOSA	State SD	Zip Code 57744-7501
-----------------	-------------	------------------------

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

Name of Employer WARRIOR ENERGY SERVICE CORP	Occupation DISTRICT MANAGER
---	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356081

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. NORMAN G. JACOBSON JR.

Mailing Address 900 UNIVERSITY STREET, #1002

City SEATTLE	State WA	Zip Code 98101-3722
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation CONSULTING ENGINEER
-----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366415

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 172 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. NORMAN G. JACOBSON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 UNIVERSITY STREET, #1002
 City SEATTLE State WA Zip Code 98101-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 20 / 2014
Transaction ID : SA11.15373345
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MR. NORMAN G. JACOBSON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 UNIVERSITY STREET, #1002
 City SEATTLE State WA Zip Code 98101-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381009
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

C. MS. HELEN K. JAEGGI
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 N 190TH ST APT 412A
 City SEATTLE State WA Zip Code 98133-3847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15354877
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. LOREN A. JAHN		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15378546
Mailing Address 13149 N COUNTRY CLUB CT		Amount of Each Receipt this Period 200.00
City PALOS HEIGHTS	State IL	Zip Code 60463-2727
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) B. MR. JERRY JARRELL		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15346550
Mailing Address 20279 SUNNY SHORES DRIVE #8		Amount of Each Receipt this Period 100.00
City HUMBLE	State TX	Zip Code 77346-1769
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. MR. JERRY JARRELL		Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11.15364844
Mailing Address 20279 SUNNY SHORES DRIVE #8		Amount of Each Receipt this Period 250.00
City HUMBLE	State TX	Zip Code 77346-1769
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. MICHAEL J. JEFFERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 BROOKSIDE DR.
 City GREENWOOD VILLAGE State CO Zip Code 80121-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **626.00**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11.15353948
 Amount of Each Receipt this Period **375.00**
 CONTRIBUTION

B. MR. ROBERT JEFFUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 19240 N MOBILE ST.
 City CITRONELLE State AL Zip Code 36522-2122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CITRONELLE DRUG CO. INC. Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **407.00**

Date of Receipt **02 / 03 / 2014**
Transaction ID : SA11.15331222
 Amount of Each Receipt this Period **407.00**
 CONTRIBUTION

C. DR. DAVID S. JENNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BEACON ST
 City MATTAPOISETT State MA Zip Code 02739-2003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15370288
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1282.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID JESSEE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 351

City PENNINGTON GAP	State VA	Zip Code 24277-0351
------------------------	-------------	------------------------

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

Name of Employer JESSEE STONE COMPANY	Occupation PRESIDENT
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2014
Transaction ID : SA11.15376349

Amount of Each Receipt this Period
350.00

CONTRIBUTION

B. JAROMIRA K. JIROTKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 GULF BLVD

City BELLEAIR BEACH	State FL	Zip Code 33786-3350
------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2014
Transaction ID : SA11.15376309

Amount of Each Receipt this Period
180.00

CONTRIBUTION

C. BARBARA D. JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6833 NORTH OCEAN BLVD. APT 5

City OCEAN RIDGE	State FL	Zip Code 33435-3345
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 07 / 2014
Transaction ID : SA11.15347809

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	780.00
TOTAL This Period (last page this line number only).....▶	

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BRUCE JOHNSONBAUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3303 WALNUT LN
 City LAFAYETTE State CA Zip Code 94549-5309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ECKHOFF & HOPPE Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 13 / 2014
Transaction ID : SA11.15359777
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

B. MR. GERALD C. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 WILLOW RD.
 City MENLO PARK State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer J C J INVESTMENT INC Occupation REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 07 / 2014
Transaction ID : SA11.15347448
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. DR. KEVIN JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2935 170TH AVE SE
 City BELLEVUE State WA Zip Code 98008-6206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OVERLAKE Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15381180
 Amount of Each Receipt this Period 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. PHILLIP R. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3127 N 160TH AVE
 City State Zip Code
 GOODYEAR AZ 85395-8191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 M & I BANK ACCOUNTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15363035
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. PHILLIP R. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3127 N 160TH AVE
 City State Zip Code
 GOODYEAR AZ 85395-8191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 M & I BANK ACCOUNTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15380978
 Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

C. MRS. REBECCA JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 257
 City State Zip Code
 PARKER KS 66072-0257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MAE RESOURCES BUSINESS PARTNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373489
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1175.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. RICHARD M. JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12808 SAYVILLE TRL
 City State Zip Code
 FORT WAYNE IN 46845-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC PHYSICIAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15342568
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. RONALD JOHNSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14901 QUORUM DRIVE
 SUITE 600
 City State Zip Code
 DALLAS TX 75254-6710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AXIOMETRICS INC. REAL ESTATE RESEARCH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15355066
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. MR. VERDELL A. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 233
 City State Zip Code
 CLEGHORN IA 51014-0233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED FARMER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371148
 Amount of Each Receipt this Period
 105.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1105.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. WILLIAM HARRISON JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 311 FARRIER ROAD

City WHITE STONE State VA Zip Code 22578-2706

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

Name of Employer INSTITUTE OF SCRAP RECYCLING INDUSTR Occupation DIRECTOR - POLITICAL & PUBLIC AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15380653

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. MRS. A. J. JOINER
Full Name (Last, First, Middle Initial)

Mailing Address 2507 RUSSELL PKWY.

City GREAT BEND State KS Zip Code 67530-2421

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15345636

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. CLAYTON R. JONES SR.
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3736

City SEATTLE State WA Zip Code 98124-3736

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15377269

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. PHYLLIS W. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4333 SHENANDOAH ST
 City State Zip Code
 DALLAS TX 75205-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384994
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. WILLIAM ALLAN JONES III
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 ANATOLE LANE NW
 City State Zip Code
 CLEVELAND TN 37312-8226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHECK INTO CASH INC CEO & FOUNDER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385526
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

C. MR. ROBERT JULEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 MAYNARD DR W
 City State Zip Code
 SAINT PAUL MN 55116-2959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SIBLEY MANOR APARTMENTS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374769
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15700.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HANS-HARTMUT KAESGEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 536 BARRETT ROAD
 City BERE A State OH Zip Code 44017-1023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371470
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. DR. DONALD D. KAISERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 WEST MERCED AVENUE STE 204
 City WEST COVINA State CA Zip Code 91790-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VALLEY IMAGING Occupation PHYSICIAN
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15352484
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. JACK KALAVRITINOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 8TH ST. NW
 City WASHINGTON State DC Zip Code 20001-3854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COVIDIEN Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379405
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM K. KAPP III
 Full Name (Last, First, Middle Initial)
 Mailing Address 543 DEER CREEK LANE
 City CAPE GIRARDEAU State MO Zip Code 63701-8580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LANDMARK HOSPITALS Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15373496
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

B. D. EDWARD KARRMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 TROPIC WAY
 City SAINT AUGUSTINE State FL Zip Code 32080-6470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15370589
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

C. D. EDWARD KARRMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 TROPIC WAY
 City SAINT AUGUSTINE State FL Zip Code 32080-6470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 20 / 2014
Transaction ID : SA11.15372215
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

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

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DAVID KATALENAS

Mailing Address 3929 S. 1ST STREET

City State Zip Code
LOUISVILLE KY 40214-1701

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

Name of Employer Occupation
NONE NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2014
Transaction ID : SA11.15331461

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PETER KAY

Mailing Address 4281 EXPRESS LN STE L5111

City State Zip Code
SARASOTA FL 34238-2602

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

Name of Employer Occupation
KPMG CPA INACTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15382586

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. FRANK W. KEENEY

Mailing Address 4784 S UPHAM CT

City State Zip Code
LITTLETON CO 80123-6303

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379443

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. THOMAS J. KELLOGG
Full Name (Last, First, Middle Initial)

Mailing Address 1776 S JACKSON ST
STE 501

City DENVER State CO Zip Code 80210-3851

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

Name of Employer WESVIEW INVESTORS Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014
Transaction ID : SA11.15331202

Amount of Each Receipt this Period
407.00

CONTRIBUTION

B. MR. THOMAS F. KELLY
Full Name (Last, First, Middle Initial)

Mailing Address 538 BELLE MEADE RD

City MONROE State GA Zip Code 30655-2028

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation BUSINESSMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15354833

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. DR. WILLIAM J. KELLY
Full Name (Last, First, Middle Initial)

Mailing Address 87 VERBENA AVE

City FLORAL PARK State NY Zip Code 11001-3014

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014
Transaction ID : SA11.15343193

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	997.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 185 OF 637
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. WILLIAM J. KELLY
Full Name (Last, First, Middle Initial)
Mailing Address 87 VERBENA AVE

City FLORAL PARK	State NY	Zip Code 11001-3014
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15343197

Amount of Each Receipt this Period
 90.00

CONTRIBUTION

B. DR. WILLIAM J. KELLY
Full Name (Last, First, Middle Initial)
Mailing Address 87 VERBENA AVE

City FLORAL PARK	State NY	Zip Code 11001-3014
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373864

Amount of Each Receipt this Period
 45.00

CONTRIBUTION

C. THOMAS K. KENAN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 4150

City CHAPEL HILL	State NC	Zip Code 27515-4150
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374352

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	635.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. LINDA G. KENDALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 CLUB HOUSE ROAD
 City KEY LARGO State FL Zip Code 33037-3600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15351502
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MRS. PATRICIA A. KENNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 W. GRAND OAK DRIVE
 City PEORIA State IL Zip Code 61615-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014
Transaction ID : SA11.15331765
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. RICHARD R. KETTERING
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 LOON AVE
 City SEBRING State FL Zip Code 33870-6765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345432
 Amount of Each Receipt this Period
 210.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1710.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 187 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. ALBERT W. KEY

Mailing Address P.O. BOX 941

City State Zip Code
 POINT CLEAR AL 36564-0941

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383260

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MEHDI KHAYAMI

Mailing Address 60 THOREAU ST, NO 292

City State Zip Code
 CONCORD MA 01742-2456

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15368019

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. ROBYN L. KHOURI

Mailing Address 49988 POWELL RIDGE COURT

City State Zip Code
 PLYMOUTH MI 48170-6378

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

Name of Employer Occupation
 DTE ENERGY EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359893

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. VERN H. KILFOY
Full Name (Last, First, Middle Initial)

Mailing Address 237 CALLE VALLE SERRANO

City	State	Zip Code
BERNALILLO	NM	87004-9704

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

Name of Employer	Occupation
PIONEER ELECTRIC POWER INC	CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378760

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. YOUN S. KIM M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 1055 FOREST HILL AVE SE APT 16

City	State	Zip Code
GRAND RAPIDS	MI	49546-3626

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381048

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. MR. THOMAS D. KING JR.
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 741

City	State	Zip Code
KILAUEA	HI	96754-0741

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360242

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM P. KING

Mailing Address 2850 S OCEAN BLVD APT 502

City	State	Zip Code
PALM BEACH	FL	33480-6248

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361347

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. BOYD KINZLEY

Mailing Address 1921 BRIARWOOD DR

City	State	Zip Code
LANSING	MI	48917-1771

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379819

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JAY I. KISLAK

Mailing Address 7900 MIAMI LAKES DRIVE WEST

City	State	Zip Code
MIAMI LAKES	FL	33016-5816

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

Name of Employer	Occupation
J. I. KISLAK, INC.	REAL ESTATE INVESTMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15355099

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 637		
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. HOWARD S. KLEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 709 LEISTER DRIVE
 City TIMONIUM State MD Zip Code 21093-7470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KLEIN FOODS Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.1538812
 Amount of Each Receipt this Period **2500.00**
 CONTRIBUTION

B. GARY KLINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4114 DAVIS PLACE, NW SUITE 311
 City WASHINGTON State DC Zip Code 20007-1279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EXPRESS SCRIPTS Occupation LOBBYIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 11 / 2014**
Transaction ID : SA11.15359667
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

C. JAMES W. KLINGLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5106 N BEAVER AVE
 City BETHANY State OK Zip Code 73008-2022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1202.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11.15369200
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JAMES W. KLINGLER
Full Name (Last, First, Middle Initial)

Mailing Address 5106 N BEAVER AVE

City BETHANY State OK Zip Code 73008-2022

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1202.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15381411

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

B. MR. LEONARD KLORFINE
Full Name (Last, First, Middle Initial)

Mailing Address 2700 N OCEAN DR APT 2103A

City RIVIERA BEACH State FL Zip Code 33404-4757

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383418

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. BYRON W. KNAPP
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1316

City BATESVILLE State MS Zip Code 38606-1316

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

Name of Employer ACI BULIDING SYSTEM Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381001

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. RONALD F. KNOX		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15383215
Mailing Address 1256 W HICKORY SPIRNGS CT		Amount of Each Receipt this Period 100.00
City BRENTWOOD	State TN	Zip Code 37027-4002
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) B. MR. FREDERICK KOZAKOVSKY		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11.15368477
Mailing Address 3074 CHERRYTREE RD		Amount of Each Receipt this Period 100.00
City COOPERSTOWN	State PA	Zip Code 16317-3316
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) C. MRS. SALLY KROCHALIS		Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11.15373497
Mailing Address 226 LINDSEY PLACE		Amount of Each Receipt this Period 5000.00
City MARIETTA	State GA	Zip Code 30067-4235
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. KEITH H. KUHLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 949 BAY ESPLANADE
 City CLEARWATER State FL Zip Code 33767-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15354823
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MRS. JANE O. KYLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 SUMMERHAVEN DR S
 City EAST SYRACUSE State NY Zip Code 13057-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376554
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION

C. FRANCIS LABRIOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1673
 City PINETOP State AZ Zip Code 85935-1673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15365740
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM LAFORCE
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 353

City MIDLAND State TX Zip Code 79702-0353

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

Name of Employer WW LAFORCE Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379561

Amount of Each Receipt this Period
 125.00

CONTRIBUTION

B. MR. DAVID LALUM
Full Name (Last, First, Middle Initial)

Mailing Address 2602 N 14TH AVE APT 18

City TUCSON State AZ Zip Code 85705-0201

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379671

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

C. TODD A. LAMMLE
Full Name (Last, First, Middle Initial)

Mailing Address 16 CAMINO BOSQUE

City BOULDER State CO Zip Code 80302-8735

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

Name of Employer SELF-EMPLOYED Occupation COMPUTER ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379761

Amount of Each Receipt this Period
 550.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00

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

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

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

FOR LINE NUMBER: PAGE 195 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. CATHERINE S. LANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1773 BUFFALO SHOALS RD
 City LINCOLNTON State NC Zip Code 28092-7203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 476.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371002
 Amount of Each Receipt this Period
 125.00
 CONTRIBUTION

B. CATHERINE S. LANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1773 BUFFALO SHOALS RD
 City LINCOLNTON State NC Zip Code 28092-7203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 476.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374461
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. DARRELL WAYNE LANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 890 SNOW CREEK CYN
 City PALM DESERT State CA Zip Code 92211-8993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369015
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. GREGORY M. LANKLER
Full Name (Last, First, Middle Initial)

Mailing Address 15500 PENNYROYAL LANE

City ROCKVILLE State MD Zip Code 20853-1477

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

Name of Employer MERCURY Occupation MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385525

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. BLAIR LARKINS
Full Name (Last, First, Middle Initial)

Mailing Address 3101 N HAMPTON DR. APT 1101

City ALEXANDRIA State VA Zip Code 22302-1528

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

Name of Employer BOCKORNY GROUP Occupation GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381638

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. DONALD E. LASATER
Full Name (Last, First, Middle Initial)

Mailing Address 8 WOODBRIDGE MANOR RD

City SAINT LOUIS State MO Zip Code 63141-8236

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361345

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1950.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. HUONG K. LE
Full Name (Last, First, Middle Initial)

Mailing Address 9278 ADELPHI RD #301

City HYATTSVILLE	State MD	Zip Code 20783-2031
---------------------	-------------	------------------------

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

Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER	Occupation NURSE
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SA11.15337521

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B. MR. HUONG K. LE
Full Name (Last, First, Middle Initial)

Mailing Address 9278 ADELPHI RD #301

City HYATTSVILLE	State MD	Zip Code 20783-2031
---------------------	-------------	------------------------

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

Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER	Occupation NURSE
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15371865

Amount of Each Receipt this Period

65.00

CONTRIBUTION

C. MR. HUONG K. LE
Full Name (Last, First, Middle Initial)

Mailing Address 9278 ADELPHI RD #301

City HYATTSVILLE	State MD	Zip Code 20783-2031
---------------------	-------------	------------------------

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

Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER	Occupation NURSE
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15381630

Amount of Each Receipt this Period

90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MISS ALICE LEBEWOHL		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15346456
Mailing Address 5500 CALLE REAL BLDG A129		Amount of Each Receipt this Period 201.00
City SANTA BARBARA	State CA	Zip Code 93111-1692
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) B. MR. SCOTT N. LEDBETTER		Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11.15366216
Mailing Address P.O. BOX 31147		Amount of Each Receipt this Period 1000.00
City SEA ISLAND	State GA	Zip Code 31561-1147
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MR. RICHARD T. LEE		Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11.15385503
Mailing Address P.O. BOX 2113		Amount of Each Receipt this Period 5000.00
City ORLANDO	State FL	Zip Code 32802-2113
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer LEE USTA COMPANIES	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6201.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. PABLO G. LEGORRETA		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15388820
Mailing Address 119 E. 79TH STREET		Amount of Each Receipt this Period 2600.00
City NEW YORK	State NY	Zip Code 10075-0339
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer ROYALTY PHARMA	Occupation FOUNDER & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

Full Name (Last, First, Middle Initial) B. MR. JOSEPH T. LEONE		Date of Receipt MM / DD / YYYY 02 / 21 / 2014 Transaction ID : SA11.15374496
Mailing Address 83 PANORAMA TR		Amount of Each Receipt this Period 251.00
City ROCHESTER	State NY	Zip Code 14625-1507
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) C. MRS. ONA F. LESTER		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15381000
Mailing Address 1101 HUMPHRIES RD. NW		Amount of Each Receipt this Period 250.00
City CONYERS	State GA	Zip Code 30012-2015
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

SUBTOTAL of Receipts This Page (optional).....▶	3101.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. ONA F. LESTER
Full Name (Last, First, Middle Initial)

Mailing Address 1101 HUMPHRIES RD. NW

City CONYERS	State GA	Zip Code 30012-2015
-----------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **890.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15383783

Amount of Each Receipt this Period

320.00

CONTRIBUTION

B. MR. DAVID C. LESUEUR
Full Name (Last, First, Middle Initial)

Mailing Address 12 WHITE BIRCH

City LITTLETON	State CO	Zip Code 80127-3551
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15376533

Amount of Each Receipt this Period

125.00

CONTRIBUTION

C. BRUCE A. LEVAHN
Full Name (Last, First, Middle Initial)

Mailing Address 5800 SAINT CROIX AVE N APT C617

City MINNEAPOLIS	State MN	Zip Code 55422-4696
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1183.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : SA11.15359871

Amount of Each Receipt this Period

132.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	577.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. BRUCE A. LEVAHN

Mailing Address 5800 SAINT CROIX AVE N APT C617

City	State	Zip Code
MINNEAPOLIS	MN	55422-4696

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1183.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15371206

Amount of Each Receipt this Period
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JAMES K. LEWIS

Mailing Address 101 CLUBHOUSE LN APT 181

City	State	Zip Code
NAPLES	FL	34105-2914

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

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SA11.15375115

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. WILLIAM C. LEWIS

Mailing Address 1105 ESTHER BLVD

City	State	Zip Code
BRYAN	TX	77802-1924

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SA11.15344521

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. WILLIAM C. LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 1105 ESTHER BLVD

City BRYAN State TX Zip Code 77802-1924

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371298

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. MR. FRANK A. LIBERTO
Full Name (Last, First, Middle Initial)

Mailing Address 680 E BASSE RD. APT. 316

City SAN ANTONIO State TX Zip Code 78209-8332

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15373164

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. MR. CLARENCE E. LILES
Full Name (Last, First, Middle Initial)

Mailing Address 4234 PALMERO BLVD.

City LOS ANGELES State CA Zip Code 90008-4422

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15347465

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. CLARENCE E. LILES
Full Name (Last, First, Middle Initial)

Mailing Address 4234 PALMERO BLVD.

City	State	Zip Code
LOS ANGELES	CA	90008-4422

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15352634

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

B. MR. ROBERT M. LINDSEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 12462

City	State	Zip Code
ROANOKE	VA	24025-2462

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

Name of Employer	Occupation
TITAN AMERICA	SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15346559

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

C. MR. DAVID LISONBEE
Full Name (Last, First, Middle Initial)

Mailing Address 9850 S. 300 W.

City	State	Zip Code
SANDY	UT	84070-3262

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

Name of Employer	Occupation
4LIFE RESEARCH	C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359890

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. GEORGE LOEBER
Full Name (Last, First, Middle Initial)

Mailing Address 1245 ABERDEEN RD

City PALATINE	State IL	Zip Code 60067-4387
------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		06		2014

Transaction ID : SA11.15340173

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. JEFFERY LOFTON
Full Name (Last, First, Middle Initial)

Mailing Address 130 EDEN LN

City MADISON	State MS	Zip Code 39110-7499
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		10		2014

Transaction ID : SA11.15354134

Amount of Each Receipt this Period
220.00

CONTRIBUTION

C. DORIS I. LONG
Full Name (Last, First, Middle Initial)

Mailing Address 1450 VENICE EAST BLVD. APT 115

City VENICE	State FL	Zip Code 34292-4001
----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		06		2014

Transaction ID : SA11.15340484

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	970.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 205 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. XING A. LONG

Mailing Address 7200 BIRCHBARK COURT

City State Zip Code
 RALEIGH NC 27615-5303

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373480

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. XING A. LONG

Mailing Address 7200 BIRCHBARK COURT

City State Zip Code
 RALEIGH NC 27615-5303

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373481

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. MARIE LOOBY

Mailing Address 12408 COPENHAVER TER

City State Zip Code
 POTOMAC MD 20854-3028

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376493

Amount of Each Receipt this Period
 207.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2207.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. PARK LOUGHLIN
Full Name (Last, First, Middle Initial)

Mailing Address 50 CALIFORNIA ST STE 3060

City SAN FRANCISCO	State CA	Zip Code 94111-4774
-----------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15384281

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. MR. RICHARD H. LOWRANCE
Full Name (Last, First, Middle Initial)

Mailing Address 831 CLIFTON ROAD, NE

City ATLANTA	State GA	Zip Code 30307-1223
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15390300

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. MR. RANDALL K. LOWRY
Full Name (Last, First, Middle Initial)

Mailing Address 15914 RATHLIN CT

City SPRING	State TX	Zip Code 77379-6887
----------------	-------------	------------------------

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

Name of Employer UNION GAS CORPORATION	Occupation OIL & GAS EXECUTIVE
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SA11.15375179

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 207 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. EDWARD A. LOZICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 29425 CHAGRIN BOULEVARD SUITE 201
 City State Zip Code
 PEPPER PIKE OH 44122-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STREN, INC. PRESIDENT
 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
 02 / 19 / 2014
Transaction ID : SA11.15372144
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. MR. DAVID LUNDQUIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 6277 NORTH OCEAN BLVD
 City State Zip Code
 OCEAN RIDGE FL 33435-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15390386
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. PHILIP LUTFY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5050 NORTH 2ND STREET
 City State Zip Code
 PHOENIX AZ 85012-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15347836
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. BEVERLY LYNN		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15392718
Mailing Address 7122 VINEWOOD ST		Amount of Each Receipt this Period -25.00
City AMARILLO	State TX	Zip Code 79108-3307
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CHARGED BACK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. MRS. WINSTON MACARTHUR		Date of Receipt MM / DD / YYYY 02 / 24 / 2014 Transaction ID : SA11.15375446
Mailing Address 579 N SUPERIOR AVE		Amount of Each Receipt this Period 100.00
City DECATUR	State GA	Zip Code 30033-5401
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. TOM B. MACCABE		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15351935
Mailing Address 284 SUGAR MILL DR.		Amount of Each Receipt this Period 500.00
City OSPREY	State FL	Zip Code 34229-9080
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 209 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DANIEL MADISON

Mailing Address 2936 CORAL STRIP PKWY

City State Zip Code
GULF BREEZE FL 32563-2631

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15381181

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. HENRY MADLEY

Mailing Address 3648 62ND AVE E

City State Zip Code
BRADENTON FL 34203-5429

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1601.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366021

Amount of Each Receipt this Period
400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. HENRY MADLEY

Mailing Address 3648 62ND AVE E

City State Zip Code
BRADENTON FL 34203-5429

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1601.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377822

Amount of Each Receipt this Period
400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00

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

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

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

FOR LINE NUMBER: PAGE 210 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. LOUIE E. MAGNE

Mailing Address 5555 DEL MONTE DR UNIT 1806

City HOUSTON State TX Zip Code 77056-4185

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15379916

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MIKE C. MALLOY

Mailing Address 207 BAY BRIDGE DR

City SUGAR LAND State TX Zip Code 77478-4739

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340643

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. MIKE C. MALLOY

Mailing Address 207 BAY BRIDGE DR

City SUGAR LAND State TX Zip Code 77478-4739

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15365591

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 211 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. CATHIE LEE MANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 HUNTERS DEN DR
 City HOUSTON State TX Zip Code 77079-6515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VISTA MGMT CO Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15348918
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

B. BILLY F. MANNING
 Full Name (Last, First, Middle Initial)
 Mailing Address 20550 HUEBNER ROAD UNIT 414
 City SAN ANTONIO State TX Zip Code 78258-3969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15369592
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MARY O. MANRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 CHERRY ST
 City UVALDE State TX Zip Code 78801-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15365720
 Amount of Each Receipt this Period 201.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 751.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOE MARKHAM
Full Name (Last, First, Middle Initial)

Mailing Address 12094 W. 75TH PL

City ARVADA State CO Zip Code 80005-5311

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

Name of Employer BOUNCE INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15380736

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MR. JOHN F. MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 136 MOORINGS PARK DR. APT 502

City NAPLES State FL Zip Code 34105-2122

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359878

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MR. EDWARD S. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON State PA Zip Code 15068-5308

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15372016

Amount of Each Receipt this Period
 600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ELIZABETH G. MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1503
 City EAST ORLEANS State MA Zip Code 02643-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **251.00**

Date of Receipt: **02 / 07 / 2014**
Transaction ID : SA11.15346754
 Amount of Each Receipt this Period: **251.00**
CONTRIBUTION

B. RICHARD MARX
 Full Name (Last, First, Middle Initial)
 Mailing Address 4355 OAK GROVE ROAD
 City RICKREALL State OR Zip Code 97371-9746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **INFORMATION REQUESTED PER BEST EFFORTS** Occupation: **INFORMATION REQUESTED PER BEST EFF**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt: **02 / 19 / 2014**
Transaction ID : SA11.15368677
 Amount of Each Receipt this Period: **250.00**
CONTRIBUTION

C. MS. LORENE R. MASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2212 MARK LN.
 City MARYVILLE State TN Zip Code 37803-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **215.00**

Date of Receipt: **02 / 06 / 2014**
Transaction ID : SA11.15341583
 Amount of Each Receipt this Period: **15.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **516.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 214 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MS. LORENE R. MASON

Mailing Address 2212 MARK LN.

City State Zip Code
 MARYVILLE TN 37803-1922

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 02 / 12 / 2014
Transaction ID : SA11.15361316

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. DENNIS M. MASTASCUSA

Mailing Address 7659 N STATE ST.
 PO BOX 149

City State Zip Code
 LOWVILLE NY 13367-1336

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

Name of Employer Occupation
 NATIONAL ABSTACT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 27 / 2014
Transaction ID : SA11.15379630

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. KENNETH J. MATHEIS SR.

Mailing Address 1776 W. CLARKSTON RD

City State Zip Code
 LAKE ORION MI 48362-2267

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

Name of Employer Occupation
 COMPLETE AUTOMAKER PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 02 / 10 / 2014
Transaction ID : SA11.15354790

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 215 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. DANIELLE S. MAURER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2507 N. VERNON ST.
 City ARLINGTON State VA Zip Code 22207-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FIERCE, ISAKOWITZ AND BLALOCK Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15379406
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

B. MR. GREG M. MAURER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2507 N. VERNON ST.
 City ARLINGTON State VA Zip Code 22207-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FACEBOOK Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15376422
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

C. MR. HENRY H. MAUZ JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1608 VISCAINO RD
 City PEBBLE BEACH State CA Zip Code 93953-3303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15383279
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GEORGE L. MAYER
Full Name (Last, First, Middle Initial)

Mailing Address 2 ANDREWS RD

City ESSEX State CT Zip Code 06426-1311

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

Name of Employer MANHATTAN REALTY GROUP Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15370283

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. CAROLYN MAYLE
Full Name (Last, First, Middle Initial)

Mailing Address 1101 16TH ST. NW SUITE 500

City WASHINGTON State DC Zip Code 20036-4815

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

Name of Employer BOCKORNY GROUP Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014
Transaction ID : SA11.15331700

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. MR. JAMES MC DONALD
Full Name (Last, First, Middle Initial)

Mailing Address 4411 SUWANEE DAM ROAD SUITE 420

City SUWANEE State GA Zip Code 30024-8705

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

Name of Employer MCDONALD & ASSOCIATES, P.C. Occupation CPA/ US TAX COURT BAR MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014
Transaction ID : SA11.15390063

Amount of Each Receipt this Period
295.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1545.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TONY J. MC KINNIS
Full Name (Last, First, Middle Initial)

Mailing Address 11709 CANTERBURY CT

City LEAWOOD State KS Zip Code 66211-2928

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

Name of Employer ENTERPRISE HOLDINGS Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15367219

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. MRS. LIDA MCALLISTER
Full Name (Last, First, Middle Initial)

Mailing Address 641 GARRATY ROAD

City SAN ANTONIO State TX Zip Code 78209-6148

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350737

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. WILLIAM C. MCCLEAN
Full Name (Last, First, Middle Initial)

Mailing Address 7939 SE GOLFHOUSE DR.

City HOBE SOUND State FL Zip Code 33455-8013

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

Name of Employer ESTABROOK CAPITAL MANAGEMENT LLC Occupation INVESTMENT PORTFOLIO MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355114

Amount of Each Receipt this Period
 201.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	951.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JIMMY L. MCCOLLUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 SOUTH MOONEY STREET
 City REDKEY State IN Zip Code 47373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation RETIRED CARPENTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **02 / 11 / 2014**
Transaction ID : SA11.15392721
 Amount of Each Receipt this Period **-15.00**
 CONTRIBUTION
 CHARGED BACK

B. MR. GARY W. MCCONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 86
 City WALLACE State NE Zip Code 69169-0086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MAC'S SUPER FOODS Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 27 / 2014**
Transaction ID : SA11.15379586
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

C. M. ASHLEY MCGEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3459 S. STAFFORD STREET
 City ARLINGTON State VA Zip Code 22206-1917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NCTA Occupation GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.15388813
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1085.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 219 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. HAROLD W. MCGRAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 745 HOLLOW TREE RIDGE RD
 City State Zip Code
 DARIEN CT 06820-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TAY MC GROW INTERIORS INTERIOR DESIGNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376326
 Amount of Each Receipt this Period
 350.00
 CONTRIBUTION

B. DR. JOHN J. MCGRAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 1181 N HIGHWAY 92
 City State Zip Code
 JEFFERSON CITY TN 37760-3852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WJFC RADIO CO-OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359892
 Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

C. MGEN. CHESTER M. MCKEEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 MUSEUM WAY APT 702
 City State Zip Code
 FORT WORTH TX 76107-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361262
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3400.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 220 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MGEN. CHESTER M. MCKEEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 MUSEUM WAY APT 702
 City State Zip Code
 FORT WORTH TX 76107-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371981
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. MGEN. CHESTER M. MCKEEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 MUSEUM WAY APT 702
 City State Zip Code
 FORT WORTH TX 76107-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374475
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MGEN. CHESTER M. MCKEEN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 MUSEUM WAY APT 702
 City State Zip Code
 FORT WORTH TX 76107-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383359
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 221 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DAVID M. MCKENNEY

Mailing Address 5026 GREENPINE DR. NE

City ATLANTA State GA Zip Code 30342-2402

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 20 / 2014
Transaction ID : SA11.15372510

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JAMES S. MCKINNON

Mailing Address 1009 CLEAR LAKE CT

City COLLEYVILLE State TX Zip Code 76034-2822

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

Name of Employer DFW PLASTICS, INC. Occupation VP, SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 02 / 10 / 2014
Transaction ID : SA11.15355032

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. PATRICK MCKINLEY

Mailing Address 506 E SHADOW GROVE LANE

City RICHMOND State TX Zip Code 77406-2432

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

Name of Employer AGR FJ BROWN INC. Occupation CONSULTING FIRM MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 06 / 2014
Transaction ID : SA11.15332209

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 637
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RODERICK C. MCLENNAN PH.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 WESLEY DRIVE
 APT 455
 City ASHEVILLE State NC Zip Code 28803-7305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350042
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. MR. RODERICK C. MCLENNAN PH.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 WESLEY DRIVE
 APT 455
 City ASHEVILLE State NC Zip Code 28803-7305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364780
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. MR. JOHN MCMANUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 10TH ST NW, SUITE 300
 City WASHINGTON State DC Zip Code 20001-4588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE MCMANUS GROUP Occupation LOBBYIST
 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
 02 / 25 / 2014
Transaction ID : SA11.15376457
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 223 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. RICHARD L. MCNEEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 32415 ARCHDALE
 City State Zip Code
 CHAPEL HILL NC 27517-8398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15381332
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. MICHAEL MCNEIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 168 LANATCHI LANE
 City State Zip Code
 EATONTON GA 31024-5677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15376414
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MR. JOSEPH MCRAE
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 GROUSE RD.
 City State Zip Code
 SUMMERVILLE SC 29485-5106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 351.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345294
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOSEPH MCRAE
Full Name (Last, First, Middle Initial)

Mailing Address 105 GROUSE RD.

City SUMMERVILLE State SC Zip Code 29485-5106

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373813

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. DAVID MEADOR
Full Name (Last, First, Middle Initial)

Mailing Address 1590 CRANBROOK DRIVE

City TROY State MI Zip Code 48084-1440

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

Name of Employer DTE ENERGY Occupation EXECUTIVE VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359894

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

C. MR. DAVID W. MEEHL
Full Name (Last, First, Middle Initial)

Mailing Address 11160 COLE RD

City NORTH EAST State PA Zip Code 16428-5256

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

Name of Employer LAKESHORE COMMUNITY SERVICES Occupation OPERATIONS MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15367114

Amount of Each Receipt this Period
 600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. GALINA D. MELLTON
Full Name (Last, First, Middle Initial)

Mailing Address 12409 URBAN DALE CT

City HOUSTON State TX Zip Code 77082-5663

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

Name of Employer WAL MART Occupation GREETER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344059

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. ROBERT MELNIK
Full Name (Last, First, Middle Initial)

Mailing Address 6520 HARWICK CIR

City HIXSON State TN Zip Code 37343-7515

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

Name of Employer UNV TN Occupation COLLEGE RESEARCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15351633

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. MR. BILLY MERRITT
Full Name (Last, First, Middle Initial)

Mailing Address 1001 BENTON CT.

City REIDSVILLE State NC Zip Code 27320-5652

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

Name of Employer SELF-EMPLOYED Occupation SMALL BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376770

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00

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

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

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

FOR LINE NUMBER: PAGE 226 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ELEANOR MERRICK

Mailing Address 3200 N POINSETTIA AVE

City State Zip Code
MANHATTAN BEACH CA 90266-3536

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379604

Amount of Each Receipt this Period
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ELEANOR MERRICK

Mailing Address 3200 N POINSETTIA AVE

City State Zip Code
MANHATTAN BEACH CA 90266-3536

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384101

Amount of Each Receipt this Period
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. HERTA MESSIK

Mailing Address 14 BALLO PL

City State Zip Code
EDISON NJ 08820-3837

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15343879

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 227 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DANIEL P. MEYER
Full Name (Last, First, Middle Initial)

Mailing Address 2100 PENNSYLVANIA AVENUE, NW, SUIT

City	State	Zip Code
WASHINGTON	DC	20037-3204

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

Name of Employer	Occupation
DUBERSTEIN GROUP	GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		19		2014

Transaction ID : SA11.15367810

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. MR. JOHN W. MEYER
Full Name (Last, First, Middle Initial)

Mailing Address 3705 VISTA GRANDE LN

City	State	Zip Code
TWIN FALLS	ID	83301-0199

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		11		2014

Transaction ID : SA11.15356484

Amount of Each Receipt this Period
315.00

CONTRIBUTION

C. MR. JOHN W. MEYER
Full Name (Last, First, Middle Initial)

Mailing Address 3705 VISTA GRANDE LN

City	State	Zip Code
TWIN FALLS	ID	83301-0199

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		19		2014

Transaction ID : SA11.15368981

Amount of Each Receipt this Period
315.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5630.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. LOUIS EDWARD MIERS JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1560 TIMBER TRACE DR

City SAINT AUGUSTINE State FL Zip Code 32092-0757

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

Name of Employer HEART LUNG SURGICAL INST Occupation PHYSICIAN ASST.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15367907

Amount of Each Receipt this Period 200.00

CONTRIBUTION

B. JAMES MILANO
Full Name (Last, First, Middle Initial)

Mailing Address 1281 GULF OF MEXICO DRIVE UNIT 40

City LONGBOAT KEY State FL Zip Code 34228-4633

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15331529

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. JAMES MILANO
Full Name (Last, First, Middle Initial)

Mailing Address 1281 GULF OF MEXICO DRIVE UNIT 40

City LONGBOAT KEY State FL Zip Code 34228-4633

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381559

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

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

FOR LINE NUMBER: PAGE 229 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. REX MILLARD

Mailing Address 8604 YAMAMOTO ST.

City LAS VEGAS State NV Zip Code 89131-2085

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381621

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MICHAEL J. MILLER

Mailing Address 123 WEST MAIN ST

City BARRINGTON State IL Zip Code 60010

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

Name of Employer SELF-EMPLOYED Occupation JEWELER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11.15362363

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ROGER M. MILLS

Mailing Address P.O. BOX 871

City SEMINOLE State OK Zip Code 74818-0871

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

Name of Employer MILLS WELL SERVICE Occupation SEMINOLE OK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344800

Amount of Each Receipt this Period
251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 801.00

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

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

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

FOR LINE NUMBER: PAGE 230 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM R. MINOR
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1349
 City SYLACAUGA State AL Zip Code 35150-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALLOY CAST PRODUCTS Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15379581
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

B. MS. LEONIDA MISIUKOWIEC
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 BARNESON AVE APT A
 City SAN MATEO State CA Zip Code 94402-2965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15378785
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

C. MR. KYLE MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 671
 City WINCHESTER State OR Zip Code 97495-0671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15348955
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 231 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. KYLE MITCHELL

Mailing Address P.O. BOX 671

City State Zip Code
 WINCHESTER OR 97495-0671

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381588

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROBERT MITCHELL

Mailing Address 306 FIELDCREST STREET SW

City State Zip Code
 HARTSELLE AL 35640-6033

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

Name of Employer Occupation
 AQUA MARINE ENT INC PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15358339

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. MAX MIZE

Mailing Address 2046 NW 180TH AVE

City State Zip Code
 PEMBROKE PINES FL 33029-3056

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

Name of Employer Occupation
 MIZC & CO INC OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376555

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DENIS MOISE
Full Name (Last, First, Middle Initial)

Mailing Address 46 PARK PL APT 7A

City NEW ROCHELLE State NY Zip Code 10801-4241

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

Name of Employer THE CARLYLE HOTEL LLC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15374912

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MR. CHARLES L. MONG
Full Name (Last, First, Middle Initial)

Mailing Address 7910 HILLCREST ROAD

City INDIANAPOLIS State IN Zip Code 46240-2521

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

Name of Employer SERVICE WAREHOUSE CORP Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388825

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. ROBERT EUGENE MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 2435 HOMESTEAD RD

City SEDONA State AZ Zip Code 86336-3262

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15373729

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 233 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ROBERT L. MOORE

Mailing Address 2525 NANTUCKET DR UNIT 6

City State Zip Code
 HOUSTON TX 77057-4829

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

Name of Employer Occupation
 SELF-EMPLOYED FINANCIAL CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 02 / 06 / 2014
Transaction ID : SA11.15332054

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROBERT L. MOORE

Mailing Address 2525 NANTUCKET DR UNIT 6

City State Zip Code
 HOUSTON TX 77057-4829

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

Name of Employer Occupation
 SELF-EMPLOYED FINANCIAL CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 02 / 27 / 2014
Transaction ID : SA11.15379615

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. HUNTER MOORHEAD

Mailing Address 1156 16TH ST., NW SUITE 329

City State Zip Code
 WASHINGTON DC 20036-4802

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

Name of Employer Occupation
 CROSSROADS STRATEGIES, LLC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 02 / 05 / 2014
Transaction ID : SA11.15337388

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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

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

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

FOR LINE NUMBER: PAGE 234 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DEAN J. MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12250 SW 33RD AVENUE
 City PORTLAND State OR Zip Code 97219-8254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15357280
 Amount of Each Receipt this Period 125.00
 CONTRIBUTION

B. MR. DEAN J. MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12250 SW 33RD AVENUE
 City PORTLAND State OR Zip Code 97219-8254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15369340
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

C. MR. DEAN J. MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12250 SW 33RD AVENUE
 City PORTLAND State OR Zip Code 97219-8254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15370856
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 235 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DEAN J. MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12250 SW 33RD AVENUE
 City PORTLAND State OR Zip Code 97219-8254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15373083
 Amount of Each Receipt this Period 270.00
 CONTRIBUTION

B. MRS. JANE S. MORRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1548 MOKULUA DR.
 City KAILUA State HI Zip Code 96734-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15392727
 Amount of Each Receipt this Period -107.00
 CONTRIBUTION
 CHARGED BACK

C. MR. WILLIAM E. MOSCHELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6712 MARBO COURT
 City FALLS CHURCH State VA Zip Code 22046-2353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROWNSTEIN HYATT FARBER SCHRECK Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331705
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1163.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. MARGARIEA MOSES
Full Name (Last, First, Middle Initial)

Mailing Address 5889 DEER CROSSING LN

City QUINLAN State TX Zip Code 75474-3641

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

Name of Employer EPICS Occupation NURSE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15348924

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. ESTELLE MOSTYN
Full Name (Last, First, Middle Initial)

Mailing Address 1199 COUNTY ROAD 217

City WEIMAR State TX Zip Code 78962-5191

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15353361

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. RICHARD MOTT
Full Name (Last, First, Middle Initial)

Mailing Address 2812 STEPHANIE DR

City LINDENWOOD State IL Zip Code 61049-9739

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15346425

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2270.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 237 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. RICHARD MOTT

Mailing Address **2812 STEPHANIE DR**

City **LINDENWOOD** State **IL** Zip Code **61049-9739**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1120.00

Date of Receipt
02 / 14 / 2014
Transaction ID : SA11.15363172

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. THOMAS MOY

Mailing Address **1818 SHWY 181**

City **KARNES CITY** State **TX** Zip Code **78118-5611**

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

Name of Employer **SELF-EMPLOYED** Occupation **DRILLER/RANCHER/INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 03 / 2014
Transaction ID : SA11.15331190

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JAMES G. MUMFORD

Mailing Address **P.O. BOX 278**

City **WESTWOOD** State **MA** Zip Code **02090-0001**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15364102

Amount of Each Receipt this Period
115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **1415.00**

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

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

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

FOR LINE NUMBER: PAGE 238 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. MARY SUE B. MUNCHRATH
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 WOODVALE AVENUE
 City LAFAYETTE State LA Zip Code 70503-4142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MIOCINA GAS INC. Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15367892
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. MR. JAY H. MURDOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 755 CASTLE BLVD.
 City AKRON State OH Zip Code 44313-5709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15344288
 Amount of Each Receipt this Period 15.00
 CONTRIBUTION

C. MR. JAY H. MURDOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 755 CASTLE BLVD.
 City AKRON State OH Zip Code 44313-5709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374427
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1215.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. JOHNYE MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address INFO REQUESTED

City ARCHER CITY State TX Zip Code 76351

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

Name of Employer SELF-EMPLOYED Occupation BOOKKEEPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **02 / 04 / 2014**
Transaction ID : **SA11.15345635**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

B. MS. JOHNYE MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address INFO REQUESTED

City ARCHER CITY State TX Zip Code 76351

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

Name of Employer SELF-EMPLOYED Occupation BOOKKEEPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : **SA11.15384156**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. MR. L. TOM MURRAY JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1201 PACIFIC AVENUE SUITE 1750

City TACOMA State WA Zip Code 98402-4389

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

Name of Employer SELF-EMPLOYED Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : **SA11.15388806**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1350.00**

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

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

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

FOR LINE NUMBER: PAGE 240 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. ROBERT G. MYERS

Mailing Address 285 GREENS FANNS RD.

City WESTPORT State CT Zip Code 06880

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : SA11.15384763

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. JACQUELINE J. NAGEL

Mailing Address 4 LYNWOOD BLVD

City EASTBOROUGH State KS Zip Code 67207-1014

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

Name of Employer FG HOLL OIL PRODUCERS Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2014
Transaction ID : SA11.15374435

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. KELLY J. NEIL

Mailing Address 114 INEZ PLACE

City MILL VALLEY State CA Zip Code 94941-2411

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

Name of Employer BAY AREA INVESTMENTS LCC Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : SA11.15380989

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

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

FOR LINE NUMBER: PAGE 241 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. GARY NELSON

Mailing Address 4227 ASPEN RIDGE DR.
 STE 255

City State Zip Code
 BILLINGS MT 59106-9610

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15373368

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. LORRAINE RONINGEN NELSON

Mailing Address 1491 LATIGO LN

City State Zip Code
 FLOWER MOUND TX 75022-6588

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15351803

Amount of Each Receipt this Period
 170.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MRS. LORRAINE RONINGEN NELSON

Mailing Address 1491 LATIGO LN

City State Zip Code
 FLOWER MOUND TX 75022-6588

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15367562

Amount of Each Receipt this Period
 175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 845.00

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

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

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

FOR LINE NUMBER: PAGE 242 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. GUY S. NEWELL

Mailing Address 246 SUITE 100

City State Zip Code
NILES MI 49120

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

Name of Employer Occupation
OXFORD GLOBAL RESOURCES ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15363079

Amount of Each Receipt this Period
157.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City State Zip Code
GREENWICH CT 06831-3104

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15331512

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. HARRY NICK

Mailing Address 521 SENECA RD.

City State Zip Code
GREAT FALLS VA 22066-1116

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15348917

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 857.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 637
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BILLY R. NIX
Full Name (Last, First, Middle Initial)

Mailing Address 810 LAFAYETTE ST

City	State	Zip Code
STARKE	FL	32091-3828

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15370781

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B. JAMES NOLAN
Full Name (Last, First, Middle Initial)

Mailing Address 8900 INDIAN CREEK PARKWAY

City	State	Zip Code
OVERLAND PARK	KS	66210-1554

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

Name of Employer	Occupation
THE NOLAN COMPANY	CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2014

Transaction ID : SA11.15337386

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. JERRY NORCIA
Full Name (Last, First, Middle Initial)

Mailing Address 17743 STONEBROOK DRIVE

City	State	Zip Code
NORTHVILLE	MI	48168-4329

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

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFF	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359888

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. ERLE A. NYE

Mailing Address 12211 CREEK FOREST

City DALLAS	State TX	Zip Code 75230-2336
----------------	-------------	------------------------

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

Name of Employer EIU CONSULTING	Occupation CONSULTANT
------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359881

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JOHN J. O' BRIEN

Mailing Address 24 PARK HL # A2

City ALBANY	State NY	Zip Code 12204-2162
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15383511

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DOUGLAS W. O' CONNOR

Mailing Address 24629 MARLBORO DRIVE

City DAMASCUS	State MD	Zip Code 20872-2244
------------------	-------------	------------------------

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

Name of Employer LEIDOS CORP	Occupation DATABASE ENGINEER
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2014

Transaction ID : SA11.15330957

Amount of Each Receipt this Period
600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3800.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 245 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. FRANCIS E. ODELL

Mailing Address **2023 AVENIDA CHICO**

City **NEWPORT BEACH** State **CA** Zip Code **92660-3906**

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

Name of Employer Occupation
RETIRED **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15353400

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. THOMAS E. ODELL

Mailing Address **59014 HILMAN RD**

City **GLENWOOD** State **IA** Zip Code **51534-5201**

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

Name of Employer Occupation
BAH **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15351983

Amount of Each Receipt this Period
365.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MARILYN ODEN

Mailing Address **742 MUNNRO AVE**

City **RIFLE** State **CO** Zip Code **81650-3632**

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

Name of Employer Occupation
RETIRED **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 26 / 2014
Transaction ID : SA11.15376467

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **965.00**

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

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

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

FOR LINE NUMBER: PAGE 246 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DAVE ODER

Mailing Address 21 PAINTED FEATHER WAY

City State Zip Code
 LAS VEGAS NV 89135-7856

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

Name of Employer Occupation
 SHIFT4 CORP EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355900

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROBERT M. OLIVER

Mailing Address 9501 SW 61ST COURT

City State Zip Code
 PINECREST FL 33156-1955

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15350702

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. WILLIAM OLIVER

Mailing Address 121 POSTWOOD PLACE

City State Zip Code
 NASHVILLE TN 37205-1604

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

Name of Employer Occupation
 NASHVILLE CARPRT CTA SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15358289

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 247 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROGER D. OLLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 9121 N BURR AVE APT 225

City PORTLAND	State OR	Zip Code 97203-2473
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
601.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15354029

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. MR. ROGER D. OLLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 9121 N BURR AVE APT 225

City PORTLAND	State OR	Zip Code 97203-2473
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
601.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15370956

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. MRS. MARY A. OLSEN
Full Name (Last, First, Middle Initial)

Mailing Address 29 COLONIAL DR

City SOMERS	State CT	Zip Code 06071-2003
----------------	-------------	------------------------

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

Name of Employer N A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

Transaction ID : SA11.15392712

Amount of Each Receipt this Period
-115.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GEORGE W. OLSON
Full Name (Last, First, Middle Initial)

Mailing Address 5206 W 80TH TER

City SHAWNEE MISSION State KS Zip Code 66208-4913

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15372254

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. PAUL OSBORNE
Full Name (Last, First, Middle Initial)

Mailing Address 217 SOUTH RIVERSIDE DRIVE

City NEPTUNE State NJ Zip Code 07753-5839

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

Name of Employer O-H INC. Occupation ELECTRICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11.15359718

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. PAUL OSBORNE
Full Name (Last, First, Middle Initial)

Mailing Address 217 SOUTH RIVERSIDE DRIVE

City NEPTUNE State NJ Zip Code 07753-5839

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

Name of Employer O-H INC. Occupation ELECTRICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376575

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. PATRICIA OUTTRIM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1455 PENNSYLVANIA AVE, NW #550

City WASHINGTON	State DC	Zip Code 20004-1024
--------------------	-------------	------------------------

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

Name of Employer CHENIER ENERGY	Occupation EXECUTIVE
------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385527

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. MRS. CYNTHIA S. PADGETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 CASTLEWOOD RD.

City BALTIMORE	State MD	Zip Code 21210-1360
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15331509

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MRS. CYNTHIA S. PADGETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 CASTLEWOOD RD.

City BALTIMORE	State MD	Zip Code 21210-1360
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381528

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 250 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ADOLF A. PAIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 PASTURE LN
 City State Zip Code
 BRYN MAWR PA 19010-1763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344775
 Amount of Each Receipt this Period
 1.00
 CONTRIBUTION

B. MR. ADOLF A. PAIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 PASTURE LN
 City State Zip Code
 BRYN MAWR PA 19010-1763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345100
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. DOLORES EILEEN PAINTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 146971 OLD CABIN RD.
 City State Zip Code
 GILCHRIST OR 97737-9738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355556
 Amount of Each Receipt this Period
 101.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 302.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 251 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DOLORES EILEEN PAINTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 146971 OLD CABIN RD.
 City State Zip Code
 GILCHRIST OR 97737-9738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360535
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. JOHN M. PANETTIERE
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 TRILLIUM DR
 City State Zip Code
 ECLECTIC AL 36024-9283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344464
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. MR. WILLIAM J. PAPE II
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 OLD SHERMAN HILL RD
 City State Zip Code
 WOODBURY CT 06798-3914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AMERICA-REPUBLIC INC NEWSPAPER PUBLISHER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355747
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. THOMAS EDWARD PAPPAS
Full Name (Last, First, Middle Initial)

Mailing Address 3925 SOUTH JONES BLVD. APT 3105

City	State	Zip Code
LAS VEGAS	NV	89103-7116

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

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15392726

Amount of Each Receipt this Period
 -10.00

CONTRIBUTION

CHECK RETURNED BY BANK

B. MR. JOHN F. PARKER
Full Name (Last, First, Middle Initial)

Mailing Address 1055 FOREST HILL AVE SE

City	State	Zip Code
GRAND RAPIDS	MI	49546-3626

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15342698

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. JAMES R. PARKS
Full Name (Last, First, Middle Initial)

Mailing Address 10474 SANTA MONICA BLVD.
SUITE 200

City	State	Zip Code
LOS ANGELES	CA	90025-6930

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

Name of Employer	Occupation
CBIZ MHM LLC	PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359880

Amount of Each Receipt this Period
 30000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30240.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 253 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. JOHN W. PARSONS

Mailing Address 319 STONECLIFFE AISLE

City State Zip Code
 IRVINE CA 92603-5728

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15357943

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. EDWIN L. PATMORE

Mailing Address 122 ALLEGHENY RIDGE LN

City State Zip Code
 BERRYVILLE VA 22611-1804

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 451.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361344

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. EDWIN L. PATMORE

Mailing Address 122 ALLEGHENY RIDGE LN

City State Zip Code
 BERRYVILLE VA 22611-1804

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 451.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15363508

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID PATTERSON
Full Name (Last, First, Middle Initial)

Mailing Address 5225 ZAKON ROAD

City TORRANCE State CA Zip Code 90505-4351

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

Name of Employer AEROSPACE MANUFACTURING GROUP INC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11.15362492

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. MS. MERYL A. PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 212 OAKMONT DR

City ROANOKE State TX Zip Code 76262-5472

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2014

Transaction ID : SA11.15361299

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. MR. ROBERT PAWES
Full Name (Last, First, Middle Initial)

Mailing Address 765 WHISPERING MARSH DR

City CHARLESTON State SC Zip Code 29412-4436

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11.15331629

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JESSIE R. PAYNE
Full Name (Last, First, Middle Initial)

Mailing Address 9104 LEXINGTON LN.

City LOUISVILLE State KY Zip Code 40241-2424

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15343662

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

B. ROCKY L. PEARSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 10241

City MIDLAND State TX Zip Code 79702-7241

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

Name of Employer PRECISION LAND SERVICES Occupation LANDMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15381617

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. THOMAS J. PEED
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 82545

City LINCOLN State NE Zip Code 68501-2545

FEC ID number of contributing federal political committee. **C**

Name of Employer SANDHILLS PUBLISHING Occupation FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379449

Amount of Each Receipt this Period
 32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	32950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. DORIS M. PELTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 11005 BALANTRE LANE
 City POTOMAC State MD Zip Code 20854-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340922
 Amount of Each Receipt this Period
 211.00
 CONTRIBUTION

B. MRS. DARLENE PENDERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5700 LIGHTHOUSE DR.
 City FLOWER MOUND State TX Zip Code 75022-6472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 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
 02 / 25 / 2014
Transaction ID : SA11.15379446
 Amount of Each Receipt this Period
 50000.00
 CONTRIBUTION
 REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

C. MR. DAVID K. PERDUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 WHITAKER BLVD
 City HUNTINGTON State WV Zip Code 25701-4707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CITIGROUP Occupation BOND TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361320
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	51211.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOSE PEREZ
Full Name (Last, First, Middle Initial)

Mailing Address 54 HEATHER CT

City SCHERERVILLE State IN Zip Code 46375-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCELOR MITTAL Occupation SERVICE TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15331630

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. JOSE PEREZ
Full Name (Last, First, Middle Initial)

Mailing Address 54 HEATHER CT

City SCHERERVILLE State IN Zip Code 46375-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCELOR MITTAL Occupation SERVICE TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378426

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

C. JOSE PEREZ
Full Name (Last, First, Middle Initial)

Mailing Address 54 HEATHER CT

City SCHERERVILLE State IN Zip Code 46375-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCELOR MITTAL Occupation SERVICE TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383481

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 258 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ROBERT M. PERKINS
 Mailing Address P.O. BOX 68
 City State Zip Code
 WHITE SULPHUR SPRINGS WV 24986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15352555
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. ADDIE M. PERRY
 Mailing Address 865 OLD DALTON RD. NE
 City State Zip Code
 ROME GA 30165-9096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340832
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. ADDIE M. PERRY
 Mailing Address 865 OLD DALTON RD. NE
 City State Zip Code
 ROME GA 30165-9096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371323
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. BUM PETRIE

Mailing Address **PO BOX 326**

City **MALTA** State **MT** Zip Code **59538-0326**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **WATER WELL DRILLER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
02 / 27 / 2014
Transaction ID : SA11.15379582

Amount of Each Receipt this Period
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. GEORGE O. PFAFF

Mailing Address **16 SALISBURY DRIVE APT 7118**

City **ASHEVILLE** State **NC** Zip Code **28803-0008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
02 / 24 / 2014
Transaction ID : SA11.15373731

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. PATRICIA L. PFAU

Mailing Address **15332 SE 46TH WAY**

City **BELLEVUE** State **WA** Zip Code **98006-3231**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **222.00**

Date of Receipt
02 / 06 / 2014
Transaction ID : SA11.15340592

Amount of Each Receipt this Period
56.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **1181.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. PATRICIA L. PFAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 15332 SE 46TH WAY
 City State Zip Code
 BELLEVUE WA 98006-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355326
 Amount of Each Receipt this Period
 55.00
 CONTRIBUTION

B. MS. PATRICIA L. PFAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 15332 SE 46TH WAY
 City State Zip Code
 BELLEVUE WA 98006-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15382673
 Amount of Each Receipt this Period
 55.00
 CONTRIBUTION

C. MR. GREGORY K. PHELPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 MAPLE RD.
 City State Zip Code
 NORTH HAMPTON NH 03862-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MANULIEFE ASSET MANAGEMENT PORTFOLIO MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366673
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ANNE PHILLIPS

Mailing Address 1330 GERALD AVE.

City	State	Zip Code
MISSOULA	MT	59801-4232

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	TRACK & FIELD COACH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331531

Amount of Each Receipt this Period
 -500.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)
B. MR. GARY J. PHILLIPS

Mailing Address P.O. BOX 484

City	State	Zip Code
BAINBRIDGE	GA	39818-0484

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DAIRY QUEEN	OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384737

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. KIMBERLY A. PHILLIPS

Mailing Address 2789 WALKER COURT

City	State	Zip Code
EXPORT	PA	15632-9307

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

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
 02 / 25 / 2014
Transaction ID : SA11.15379458

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. DONALD PHIPPS		Date of Receipt MM / DD / YYYY 02 / 11 / 2014 Transaction ID : SA11.1535287
Mailing Address 200 GLENWOOD CIR APT 308		Amount of Each Receipt this Period 200.00
City MONTEREY	State CA	Zip Code 93940-6744
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. DONALD PHIPPS		Date of Receipt MM / DD / YYYY 02 / 21 / 2014 Transaction ID : SA11.15374384
Mailing Address 200 GLENWOOD CIR APT 308		Amount of Each Receipt this Period 100.00
City MONTEREY	State CA	Zip Code 93940-6744
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. SIDNEY PIKE		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15383451
Mailing Address 2809 GLAD SPRINGS DR NE		Amount of Each Receipt this Period 100.00
City ATLANTA	State GA	Zip Code 30345-4029
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. LESLIE O. PIRNIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 587 TIMBERLANE ROAD
 City State Zip Code
 PIKE ROAD AL 36064-2233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373498
 Amount of Each Receipt this Period
 4800.00
 CONTRIBUTION

B. MR. ROBERT M. PIRNIE III
 Full Name (Last, First, Middle Initial)
 Mailing Address 587 TIMBERLANE ROAD
 City State Zip Code
 PIKE ROAD AL 36064-2233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CONFERENCE AMERICA PRESIDENT/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373495
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

C. MRS. PHYLLIS PITCAIRN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2582 HALLOWELL RD
 City State Zip Code
 HUNTINGDON VALLEY PA 19006-6108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 211.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376466
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 37300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES D. PITCOCK JR.

Mailing Address 10006 BALMFORTH LANE

City HOUSTON	State TX	Zip Code 77096-5302
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WILLIAMS BROTHERS CONSTRUCTION	Occupation C E O HWY. & HEAVY CONSTRUCTION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
02 / 10 / 2014

Transaction ID : SA11.15359883

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DICK POLLARD

Mailing Address 6609 NORFOLK AVE

City LUBBOCK	State TX	Zip Code 79413-5902
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 20 / 2014

Transaction ID : SA11.15372315

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY O. POLLOCK

Mailing Address 150 PORTOLA RD

City PORTOLA VALLEY	State CA	Zip Code 94028-7852
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PELLOCR FINANCIAL GROUP	Occupation VP REAL ESTATE
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
02 / 07 / 2014

Transaction ID : SA11.15346663

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JEFFREY O. POLLOCK
Full Name (Last, First, Middle Initial)

Mailing Address 150 PORTOLA RD

City	State	Zip Code
PORTOLA VALLEY	CA	94028-7852

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PELOCR FINANCIAL GROUP	VP REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : SA11.15382829

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. DENNIS POTTER
Full Name (Last, First, Middle Initial)

Mailing Address 1601 K ST. NW

City	State	Zip Code
WASHINGTON	DC	20006-1682

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
K & L GATES LLP	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : SA11.15381596

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. MR. LEW PRATCH
Full Name (Last, First, Middle Initial)

Mailing Address 6220 TALLY HO LN

City	State	Zip Code
ALEXANDRIA	VA	22307-1013

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 06 / 2014
Transaction ID : SA11.15332055

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. ANDREW G. PUBLAW
 Mailing Address 896 HIGHLAND AVE
 City State Zip Code
 ROCHESTER NY 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HAZLOW ELECTRIC ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376546
 Amount of Each Receipt this Period
 400.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JAMES L. QUINN
 Mailing Address 3310 FAIRMOUNT ST
 APT 8D
 City State Zip Code
 DALLAS TX 75201-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 QUINN PRINTING CO. PRINT SHOP OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376564
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. PHILLIP C. QUINN
 Mailing Address 115 COUNTRY ESTATES DR
 City State Zip Code
 MITCHELL IN 47446-6614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15365711
 Amount of Each Receipt this Period
 201.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 851.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. SAMUEL QUINN
Full Name (Last, First, Middle Initial)

Mailing Address 303 E CHURCH ST APT 14

City MARTINSVILLE	State VA	Zip Code 24112-2938
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	18	/	2014

Transaction ID : SA11.15363425

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. MR. SAMUEL QUINN
Full Name (Last, First, Middle Initial)

Mailing Address 303 E CHURCH ST APT 14

City MARTINSVILLE	State VA	Zip Code 24112-2938
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15377661

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. DAVID RAFFO
Full Name (Last, First, Middle Initial)

Mailing Address 2515 SNOWDROP STREET

City SAN DIEGO	State CA	Zip Code 92105-4619
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

Transaction ID : SA11.15374379

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DAVID RAFFO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2515 SNOWDROP STREET
 City SAN DIEGO State CA Zip Code 92105-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15383159
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MR. EDWARD MICHAEL RAHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4101 CATHEDRAL AVENUE N.W. #707
 City WASHINGTON State DC Zip Code 20016-3598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer E. M. RAHAL & COMPANY Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15373488
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

C. ROBERT RAHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4601 LYMAN DR
 City HILLIARD State OH Zip Code 43026-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BOBBY RAHAL AUTO GROUP Occupation AUTOMOTIVE RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15361267
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. WAYNE RASMUSSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2857
 City MARTINEZ State CA Zip Code 94553-7857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15366532
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

B. JERRY RAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6910 BELLAIRE BLVD STE 16
 City HOUSTON State TX Zip Code 77074-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11.15362429
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MORRIS TRAWICK REAGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 VILLAGE GARDEN DRIVE
 City MADISON State MS Zip Code 39110-6953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15357824
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. NORMAN H. RENNER

Mailing Address 19678 STATE ROUTE 161

City	State	Zip Code
IRWIN	OH	43029-9610

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356699

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. RICHARD K. REVLING

Mailing Address 1971 W VIA DEL PICAMADEROS

City	State	Zip Code
GREEN VALLEY	AZ	85622-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378776

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JOSEPH A. REYES

Mailing Address 10712 ALLOWAY DR.

City	State	Zip Code
POTOMAC	MD	20854-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ORION ENT INC	PEDDLER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377114

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. LINDA H. REYNOLDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 LONGHAVEN DR
 City MAITLAND State FL Zip Code 32751-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **217.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15374926
 Amount of Each Receipt this Period **25.00**
 CONTRIBUTION

B. MR. CLIFF M. RICCIO JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4810 25TH STREET N
 City ARLINGTON State VA Zip Code 22207-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NCTA Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15374691
 Amount of Each Receipt this Period **2500.00**
 CONTRIBUTION

C. JONATHAN D. RICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 LIVE OAK DRIVE
 City VERO BEACH State FL Zip Code 32963-9675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BERRY PLASTICS CORPORATION Occupation C.E.O.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.15388811
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3525.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID B. RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 82 BIRCH AVE
 City State Zip Code
 CORTE MADERA CA 94925-1053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369276
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. GRIFFITH RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 91610
 City State Zip Code
 LAFAYETTE LA 70509-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RICHARD GRIFFITH INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344746
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. GRIFFITH RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 91610
 City State Zip Code
 LAFAYETTE LA 70509-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RICHARD GRIFFITH INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369196
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHN G. RICHARDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7550 OLD HICKORY LANE
 City State Zip Code
 CINCINNATI OH 45243-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 22600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373491
 Amount of Each Receipt this Period
 22600.00
 CONTRIBUTION

B. MS. MONTE RICHARDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 HIGHBRIDGE XING APT 3301
 City State Zip Code
 ASHEVILLE NC 28803-4169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361193
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. MR. JAMES F. RILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7305 MASTERS DR
 City State Zip Code
 POTOMAC MD 20854-3850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15380577
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 23300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. WILLIAM RITCHIE
Full Name (Last, First, Middle Initial)

Mailing Address 5302 BROOKWAY DR

City State Zip Code
BETHESDA MD 20816-1308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2014
Transaction ID : SA11.15373410

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. EDDIE E. ROBBINS
Full Name (Last, First, Middle Initial)

Mailing Address 27 NORTHRIDGE CIR.

City State Zip Code
TEXARKANA TX 75503-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014
Transaction ID : SA11.15376972

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. MR. DAVID ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 998 5TH AVENUE #1W

City State Zip Code
NEW YORK NY 10028-0102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANGELO GORDON & COMPANY INVESTMENT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15388814

Amount of Each Receipt this Period
32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	32900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. HALL M. ROBERTS		Date of Receipt
Mailing Address P.O. BOX 10		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
POSTVILLE	IA	52162-0010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15361289
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	CORP. PRESIDENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR. HALL M. ROBERTS		Date of Receipt
Mailing Address P.O. BOX 10		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
POSTVILLE	IA	52162-0010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15372192
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	CORP. PRESIDENT	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR. KENNETH ROBERTS		Date of Receipt
Mailing Address 902 COLONADE RD		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHOREWOOD	IL	60404-9141
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15373627
Name of Employer	Occupation	Amount of Each Receipt this Period
ROBERT SEWING CENTER INC	C.E.O.	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1400.00"/>
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 276 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TRAVIS ROBERTSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2465 ANTIOCH RD
 City State Zip Code
 WETUMPKA AL 36092-6236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 402.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345348
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION

B. TRAVIS ROBERTSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2465 ANTIOCH RD
 City State Zip Code
 WETUMPKA AL 36092-6236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 402.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15368494
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. TRAVIS ROBERTSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2465 ANTIOCH RD
 City State Zip Code
 WETUMPKA AL 36092-6236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 402.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374418
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. WILLIAM E. ROBERTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1240 SOUTHAMPTON DR
 City ALEXANDRIA State LA Zip Code 71303-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC PHYSICIAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15372193
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MS. CELIA S. ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 5TH AVE NW APT 304
 City KASSON State MN Zip Code 55944-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED PHYSICAL THERAPIST/TEACHER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 271.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376563
 Amount of Each Receipt this Period
 125.00
 CONTRIBUTION

C. MONETTE S. ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4100 NORTH OCEAN DRIVE APT 2104D
 City RIVIERA BEACH State FL Zip Code 33404-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340427
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 875.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOE W. ROGERS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 8050
 City NORCROSS State GA Zip Code 30091-8050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WAFFLE HOUSE, INC. Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15385523
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. MR. JOHN W. ROGERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 15941 GLENISLE WAY
 City FORT MYERS State FL Zip Code 33912-3924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15340777
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. GALE H. ROID
 Full Name (Last, First, Middle Initial)
 Mailing Address 2210 W MAIN ST STE 305
 City BATTLE GROUND State WA Zip Code 98604-4236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TESTING RESEARCH Occupation CONSULTANT & AUTHOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15382929
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. LESLIE ROSE
Full Name (Last, First, Middle Initial)

Mailing Address 330 S OCEAN BLVD APT 3B

City PALM BEACH	State FL	Zip Code 33480-4263
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2014

Transaction ID : SA11.15343637

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. MS. MARY LOU ROSEN RANZ
Full Name (Last, First, Middle Initial)

Mailing Address 186 JERRY BROWNE RD UNIT 1408

City MYSTIC	State CT	Zip Code 06355-4007
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SA11.15344077

Amount of Each Receipt this Period
835.00

CONTRIBUTION

C. FRED ROSS
Full Name (Last, First, Middle Initial)

Mailing Address 1505 PATTON DR APT 223

City MAHOMET	State IL	Zip Code 61853-8118
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15358734

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1535.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RONALD T. ROUNDTREE
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 TRACE COLONY PARK DRIVE
 City State Zip Code
 RIDGELAND MS 39157-8810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373485
 Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

B. MR. VICTOR J. RUDOLPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 8408 CHAPIN RD
 City State Zip Code
 FORT WORTH TX 76116-6849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340930
 Amount of Each Receipt this Period
 102.00
 CONTRIBUTION

C. MR. VICTOR J. RUDOLPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 8408 CHAPIN RD
 City State Zip Code
 FORT WORTH TX 76116-6849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356692
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1702.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HENRY RUSHING
Full Name (Last, First, Middle Initial)

Mailing Address 59 DAMONTE RANCH PKWY STE B

City	State	Zip Code
RENO	NV	89521-2989

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374502

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MR. THOMAS RUSSELL
Full Name (Last, First, Middle Initial)

Mailing Address 12607 S 12TH ST

City	State	Zip Code
JENKS	OK	74037-4993

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
THOMAS RUSSELL CO	ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15367672

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MR. THOMAS RYAN
Full Name (Last, First, Middle Initial)

Mailing Address 316 FOSTER AVE

City	State	Zip Code
FREELAND	PA	18224-3309

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFC	INFORMATION REQUESTED PER BEST EFFC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15372682

Amount of Each Receipt this Period
 125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 637
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. LT COL GLEN L. RYLAND USAF (RET.)
 Mailing Address 8545 CARMEL VALLEY RD
 City State Zip Code
 CARMEL CA 93923-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374351
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. MARY B. RYSER
 Mailing Address P.O. BOX 476
 City State Zip Code
 MELFA VA 23410-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11.15359849
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. MARY B. RYSER
 Mailing Address P.O. BOX 476
 City State Zip Code
 MELFA VA 23410-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15376566
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 283 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOSE L. SALAZAR SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1179 N MADISON AVE
 City State Zip Code
 LOS ANGELES CA 90029-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED BUILDING ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15349930
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. MR. JOSE L. SALAZAR SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1179 N MADISON AVE
 City State Zip Code
 LOS ANGELES CA 90029-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED BUILDING ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371068
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. JOSHUA SALTZMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8647 NORTHBEND CIRCLE
 City State Zip Code
 EASTON MD 21601-7327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AIRLINES FOR AMERICA VICE PRESIDENT, GLOBAL GOVERNMENT /
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15368020
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. NANCY S. SAMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9614 PARKWOOD COURT
 City FORT MYERS State FL Zip Code 33908-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15342048
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MR. ADEL SANCHEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 FAIRFAX DR.
 City ARLINGTON State VA Zip Code 22201-2712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15392724
 Amount of Each Receipt this Period -26.00
 CONTRIBUTION
 CHARGED BACK

C. DR. FOSTER J. SANDERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 LONGFIELD CIR
 City CHARLOTTE State NC Zip Code 28270-9787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15339940
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 424.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. JOE FRANK SANDERSON JR.
 Mailing Address P.O. BOX 988
 City LAUREL State MS Zip Code 39441-0988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SANDERSON FARMS INC. Occupation CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15359884
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JOHN SANTNER
 Mailing Address 5399 PLAYA VISTA DR APT G
 City PLAYA VISTA State CA Zip Code 90094-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331532
 Amount of Each Receipt this Period -25.00
 CONTRIBUTION
 CHARGED BACK

Full Name (Last, First, Middle Initial)
C. MR. JOHN SANTNER
 Mailing Address 5399 PLAYA VISTA DR APT G
 City PLAYA VISTA State CA Zip Code 90094-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.15331534
 Amount of Each Receipt this Period -25.00
 CONTRIBUTION
 CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 9950.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RALPH S. SAUL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 WAVERLY RD APT B037

City GLADWYNE	State PA	Zip Code 19035-1260
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FINANCIAL CONSULTANT
-----------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374285

Amount of Each Receipt this Period
 251.00

CONTRIBUTION

B. MR. FRITZ SCHAEFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 691 DEER PARK RD

City HUNTINGTON STATION	State NY	Zip Code 11746-6201
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ATLANTIC NURSERY	Occupation CARPENTER
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384707

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MS. MARGARET N. SCHAEFFNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11899 ABERDEEN ST NE

City MINNEAPOLIS	State MN	Zip Code 55449-4787
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15357362

Amount of Each Receipt this Period
 101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	602.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. MARGARET N. SCHAEFFNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11899 ABERDEEN ST NE
 City State Zip Code
 MINNEAPOLIS MN 55449-4787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377289
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. G. N. SCHAHET
 Full Name (Last, First, Middle Initial)
 Mailing Address 9333 N. MERIDIAN STREET
 SUITE 203
 City State Zip Code
 INDIANAPOLIS IN 46260-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SCHAHET HOTELS INC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388827
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. MS. STELLA S. SCHEER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1533 RANGE AVE APT 1
 City State Zip Code
 SANTA ROSA CA 95401-4227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 USA GOVERNMENT CLERK OF USPS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 481.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374376
 Amount of Each Receipt this Period
 380.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5480.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JOHN SCHEUMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3322 CROSSPOINT CT S
 City LAFAYETTE State IN Zip Code 47909-7326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383791
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

B. JACK W. SCHINDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 16282 RD 20
 City FORT JENNINGS State OH Zip Code 45844-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371910
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. JACK W. SCHINDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 16282 RD 20
 City FORT JENNINGS State OH Zip Code 45844-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384285
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MISS DORIS B. SCHLEHOFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 CENTRE PIKE
 City EASTFORD State CT Zip Code 06242-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 267.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344301
 Amount of Each Receipt this Period
 135.00
 CONTRIBUTION

B. MISS DORIS B. SCHLEHOFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 CENTRE PIKE
 City EASTFORD State CT Zip Code 06242-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 267.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378183
 Amount of Each Receipt this Period
 132.00
 CONTRIBUTION

C. MR. JAY D. SCHLICHTING
 Full Name (Last, First, Middle Initial)
 Mailing Address 7333 WELLCREST DR
 City DALLAS State TX Zip Code 75230-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED SELF-EMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384283
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1267.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. PAUL E. SCHMERMOND
Full Name (Last, First, Middle Initial)

Mailing Address 23 PARAMOUNT AVE.

City HAMDEN State CT Zip Code 06517-2713

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15392725

Amount of Each Receipt this Period
 -15.00

CONTRIBUTION

CHECK RETURNED BY BANK

B. MR. THEODORE SCHMIDT
Full Name (Last, First, Middle Initial)

Mailing Address 2115 E CONNOR PARK CV

City SALT LAKE CITY State UT Zip Code 84109-2468

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345806

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MR. ROBERT L. SCHNEIDER
Full Name (Last, First, Middle Initial)

Mailing Address 14392 WILLOW LN

City TUSTIN State CA Zip Code 92780-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15368003

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1235.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ROGER SCHNEIDER		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15349840
Mailing Address 1423 GROVE AVE		Amount of Each Receipt this Period 250.00
City NORTH CHICAGO	State IL	Zip Code 60064-1720
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) B. MR. ALFRED SCHONBERGER		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15353064
Mailing Address 5117 14TH. AVE		Amount of Each Receipt this Period 50.00
City BROOKLYN	State NY	Zip Code 11219-3628
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. MS. TRUDY SWANSON SCHREIER		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15384277
Mailing Address 43877 E PAUL LAKE DR		Amount of Each Receipt this Period 103.00
City PERHAM	State MN	Zip Code 56573-8619
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

SUBTOTAL of Receipts This Page (optional).....▶	403.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. THOMAS SCHRIBER
Full Name (Last, First, Middle Initial)

Mailing Address 3028 OCEAN BLVD.

City CORONA DEL MAR State CA Zip Code 92625-3235

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361981

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. MR. VANCE W. SCHUEMANN
Full Name (Last, First, Middle Initial)

Mailing Address 505 CATHEDRAL DRIVE

City ALEXANDRIA State VA Zip Code 22314-4705

FEC ID number of contributing federal political committee. **C**

Name of Employer APPIAN CONSULTING, LLC Occupation FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15380637

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. MR. LESTER W. SCHULTZ
Full Name (Last, First, Middle Initial)

Mailing Address 319 S HARRISON ST.

City LAURENS State IA Zip Code 50554-1452

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15380296

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. SUSAN M. SCHULTZ
Full Name (Last, First, Middle Initial)

Mailing Address 10030 W WESLEY PL

City LAKEWOOD State CO Zip Code 80227-3069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 25 / 2014
Transaction ID : SA11.15377455

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. LAWRENCE F. SCHUMANN
Full Name (Last, First, Middle Initial)

Mailing Address 889 RIVERSIDE DR APT 102

City FORT LAUDERDALE State FL Zip Code 33312-7655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 19 / 2014
Transaction ID : SA11.15371976

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. LAWRENCE F. SCHUMANN
Full Name (Last, First, Middle Initial)

Mailing Address 889 RIVERSIDE DR APT 102

City FORT LAUDERDALE State FL Zip Code 33312-7655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 26 / 2014
Transaction ID : SA11.15376615

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MRS. JANE SCIUTTO

Mailing Address 18610 SPYGLASS RD

City State Zip Code
HIDDEN VALLEY LAKE CA 95467-8659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15373621

Amount of Each Receipt this Period
307.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DALE D. SCOTT

Mailing Address 304 E CLEVELAND ST.

City State Zip Code
LAFAYETTE CO 80026-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BALL CORP ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15347469

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DAVID SCOTT

Mailing Address P.O. BOX 43

City State Zip Code
WINNSBORO TX 75494-0043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15390460

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1057.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JUAN CARLOS SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 3118 MILITARY ROAD

City ARLINGTON State VA Zip Code 22207-4136

FEC ID number of contributing federal political committee. **C**

Name of Employer: ADVAMED Occupation: SENIOR VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 20 / 2014
Transaction ID : SA11.15376774

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. MR. THOMAS A. SCULLY
Full Name (Last, First, Middle Initial)

Mailing Address 1801 EDGEHILL DRIVE

City ALEXANDRIA State VA Zip Code 22307-1122

FEC ID number of contributing federal political committee. **C**

Name of Employer: ALSTON & BIRD LLP Occupation: SENIOR COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 02 / 26 / 2014
Transaction ID : SA11.15385502

Amount of Each Receipt this Period: 15000.00

CONTRIBUTION

C. MR. AVERY SEAMAN JR.
Full Name (Last, First, Middle Initial)

Mailing Address 88 NIAN TIC AVE.

City PROVIDENCE State RI Zip Code 02907-3116

FEC ID number of contributing federal political committee. **C**

Name of Employer: CORP. BROTHERS INC. Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 26 / 2014
Transaction ID : SA11.15376596

Amount of Each Receipt this Period: 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 16300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. LOREN L. SEAMAN

Mailing Address 1754 STATE HWY 25

City State Zip Code
HUGOTON KS 67951-8910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CROP CONSULTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15380991

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. JOEL K. SEARS

Mailing Address 4014 E OLMSTED RD

City State Zip Code
SPOKANE WA 99223-9434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15346254

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RANJIT SEELAGAN

Mailing Address 1060 CHESTNUT RIDGE ROAD

City State Zip Code
AMHERST NY 14228-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF(

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014
Transaction ID : SA11.15377870

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 297 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. PAULINE SEELIGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1187 NORTHERN PINE DR.
 City State Zip Code
 TWIN FALLS ID 83301-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15356431
 Amount of Each Receipt this Period
 90.00
 CONTRIBUTION

B. MS. PAULINE SEELIGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1187 NORTHERN PINE DR.
 City State Zip Code
 TWIN FALLS ID 83301-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371680
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. THOMAS A. SEENO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 MT DIABLO BLVD STE 440
 City State Zip Code
 WALNUT CREEK CA 94596-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15372133
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 690.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. WILLIAM I. SEGARS
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 IDYLWOOD DR
 City ATHENS State GA Zip Code 30605-4634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2014**
Transaction ID : SA11.15376535
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

B. ROBERT SELLENRIEK
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 237
 City JONESBURG State MO Zip Code 63351-0237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELLENREK COAST INC Occupation CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 14 / 2014**
Transaction ID : SA11.15359851
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

C. MS. SHIRLEY A. SEMLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1053 CHAMBERS RD.
 City HORSEHEADS State NY Zip Code 14845-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **401.00**

Date of Receipt **02 / 18 / 2014**
Transaction ID : SA11.15364019
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MS. SHIRLEY A. SEMLER

Mailing Address 1053 CHAMBERS RD.

City State Zip Code
HORSEHEADS NY 14845-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374359

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. MIKE SHADOWEN

Mailing Address 437 COUNTRY CLUB ESTATES ROAD

City State Zip Code
GLASGOW KY 42141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLASGOW RADIOLOGY P.S.C. PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15367128

Amount of Each Receipt this Period
201.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DORIS F. SHAHA

Mailing Address 2889 FIDLER AVE

City State Zip Code
LONG BEACH CA 90815-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15371855

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 601.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 300 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. PETER W. SHAW

Mailing Address 715 E INVERNESS DR

City State Zip Code
SIOUX FALLS SD 57108-4673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MIDWEST EMPLOYERS CASUALTY COMPAN FINANCE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014
Transaction ID : SA11.15331242

Amount of Each Receipt this Period
207.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. WILLIS W. SHENK

Mailing Address 635 WILLOW VALLEY SQUARE APT H505

City State Zip Code
LANCASTER PA 17602-4869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014
Transaction ID : SA11.15343626

Amount of Each Receipt this Period
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. WILLIS W. SHENK

Mailing Address 635 WILLOW VALLEY SQUARE APT H505

City State Zip Code
LANCASTER PA 17602-4869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014
Transaction ID : SA11.15373302

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	457.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. CLEONE SHERMAN		Date of Receipt MM / DD / YYYY 02 / 27 / 2014 Transaction ID : SA11.15390535
Mailing Address 4403 PIONEER RD SE #324		Amount of Each Receipt this Period 250.00
City ALEXANDRIA	State MN	Zip Code 56308-9219
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CONTRIBUTION		

Full Name (Last, First, Middle Initial) B. MR. R. STRATFORD SHIELDS		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15379442
Mailing Address 845 W. BELDEN AVENUE		Amount of Each Receipt this Period 5000.00
City CHICAGO	State IL	Zip Code 60614-3240
FEC ID number of contributing federal political committee.	C	
Name of Employer MORGAN STANLEY	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
CONTRIBUTION		

Full Name (Last, First, Middle Initial) C. LEON SHIMER		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15383415
Mailing Address 7114 SW 90TH ST		Amount of Each Receipt this Period 100.00
City HAMPTON	State FL	Zip Code 32044-4338
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	
CONTRIBUTION		

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HAROLD SHINN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 620475

City DORAVILLE	State GA	Zip Code 30362-2475
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2014

Transaction ID : SA11.15345904

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. MR. DAVID T. SHIRAISHI
Full Name (Last, First, Middle Initial)
Mailing Address 1596 PAUKIKI ST

City KAILUA	State HI	Zip Code 96734-4175
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY & COUNTY OF HONOLULU	Occupation ENGINEER/ADMINISTRATOR
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15359562

Amount of Each Receipt this Period
125.00

CONTRIBUTION

C. ANNEKE H. SHURTLEFF
Full Name (Last, First, Middle Initial)
Mailing Address 11600 CHALK HILL ROAD

City HEALDSBURG	State CA	Zip Code 95448-8034
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	19	/	2014

Transaction ID : SA11.15371280

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. MARVIN R. SINE

Mailing Address HC71 BOX 91

City State Zip Code
CAPON BRIDGE WV 26711-9501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383190

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. REX A. SINQUEFIELD

Mailing Address 9 HORTENSE PLACE

City State Zip Code
ST. LOUIS MO 63108-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHOW ME INSTITUTE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373490

Amount of Each Receipt this Period
32500.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

Full Name (Last, First, Middle Initial)
C. MS. DONNA M. SIPP

Mailing Address P.O. BOX 388

City State Zip Code
HAY SPRINGS NE 69347-0388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374371

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 32750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MS. DONNA M. SIPP

Mailing Address P.O. BOX 388

City State Zip Code
HAY SPRINGS NE 69347-0388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA11.15375106

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ANNON SITCHIN

Mailing Address 12691 CORAL LAKES DRIVE

City State Zip Code
BOYNTON BEACH FL 33437-4191

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15352014

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JOHN R. SKAGGS

Mailing Address 2601 BOWIE ST.

City State Zip Code
AMARILLO TX 79109-2109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15383160

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	805.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. ORVAL E. SKRDLANT		Date of Receipt
Mailing Address 4316 RD. W1		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORTON	KS	67654-5465
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15344601
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	FARMER	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="216.00"/>	

Full Name (Last, First, Middle Initial) B. MR. ORVAL E. SKRDLANT		Date of Receipt
Mailing Address 4316 RD. W1		<input type="text" value="02"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORTON	KS	67654-5465
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15357497
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	FARMER	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="216.00"/>	

Full Name (Last, First, Middle Initial) C. MR. CARL BLACKSTONE SMITH		Date of Receipt
Mailing Address 3554 VAUGHN RD		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
MONTGOMERY	AL	36106-2723
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15374787
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="590.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 306 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. CHARLES D. SMITH		Date of Receipt
Mailing Address 534 TRAILRIDGE DR.		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City State Zip Code BONITA CA 91902-4065		Transaction ID : SA11.15366298
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>

Full Name (Last, First, Middle Initial) B. MR. CHARLES D. SMITH		Date of Receipt
Mailing Address 534 TRAILRIDGE DR.		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City State Zip Code BONITA CA 91902-4065		Transaction ID : SA11.15373809
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>

Full Name (Last, First, Middle Initial) C. K. CONWELL SMITH		Date of Receipt
Mailing Address 1110 3RD ST SE		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code WASHINGTON DC 20003-3426		Transaction ID : SA11.15376423
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Occupation FEDERATION OF AMERICAN HOSPITALS VP, LEGISLATION		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. KENNEDY SMITH

Mailing Address 9775 W WYNN CT.

City State Zip Code
 CRYSTAL RIVER FL 34429-5345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384243

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. LOUISE D. SMITH

Mailing Address 1116 HOLIDAY DR

City State Zip Code
 CROSSVILLE TN 38555-5825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF-EMPLOYED PHARMACY MANAGER/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374446

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. MICHAEL E. SMITH

Mailing Address 100 N BROADWAY AVE
 STE 2900

City State Zip Code
 OKLAHOMA CITY OK 73102-8865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 HALL & ESTILL LAW FIRM LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376387

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. NELDA H. SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 1107 NW 52ND TER.
City GAINESVILLE State FL Zip Code 32605-4437
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 252.50

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15343624
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. RYABN SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 1350 I. ST. NW, STE 510,
City WASHINGTON State DC Zip Code 20005-3355
FEC ID number of contributing federal political committee. **C**
Name of Employer BHFS Occupation ATTORNEY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367640
Amount of Each Receipt this Period 500.00
CONTRIBUTION

C. MR. SPENCER SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 27990 ROAD P
City DOLORES State CO Zip Code 81323-9268
FEC ID number of contributing federal political committee. **C**
Name of Employer SMITH GROUP SERVICES Occupation CEO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15373493
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. STEPHEN B. SMITH
 Mailing Address 1749 RAVENSWOOD FARM LANE
 City State Zip Code
 BRENTWOOD TN 37027-8146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HAURY AND SMITH REALTORS PRINCIPAL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15373732
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. TROY A. SMITH
 Mailing Address 2202 YORKSHIRE SE
 City State Zip Code
 DECATUR AL 35601-3470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340640
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. TROY A. SMITH
 Mailing Address 2202 YORKSHIRE SE
 City State Zip Code
 DECATUR AL 35601-3470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374360
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM S. SMITH

Mailing Address 728 NORRISTOWN RD APT G104

City State Zip Code
AMBLER PA 19002-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.1536970

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. WILLIAM S. SMITH

Mailing Address 728 NORRISTOWN RD APT G104

City State Zip Code
AMBLER PA 19002-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.1538341

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. KENNETH P. SNOKE

Mailing Address 4502 E 85TH ST

City State Zip Code
TULSA OK 74137-1918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364107

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JAMES E. SNYDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 WESTERN SUNSET TRL
 City SNYDER State OK Zip Code 73566-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15378220
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

B. MARGUERITE SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 55802 BRAE BURN
 City LA QUINTA State CA Zip Code 92253-5672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15360200
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MR. JOHN SOROVETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 8389 HEARTWOOD DRIVE
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RED SPOT PAINT AND VARNISH CO., INC. Occupation GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367614
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHN SOROVETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 8389 HEARTWOOD DRIVE
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RED SPOT PAINT AND VARNISH CO., INC. Occupation GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15380631
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MR. JOHN SOROVETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 8389 HEARTWOOD DRIVE
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RED SPOT PAINT AND VARNISH CO., INC. Occupation GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15380633
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. MR. KENNETH L. SORUM
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 188
 City CROSBY State ND Zip Code 58730-0188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SORUM'S WESTLAND SERVICE Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379646
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MS. JULBRINE SOTELO		Date of Receipt MM / DD / YYYY 02 / 06 / 2014 Transaction ID : SA11.15339749
Mailing Address 14097 SW 51ST LANE		Amount of Each Receipt this Period 100.00
City MIRAMAR	State FL	Zip Code 33027-5974
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer IMS AEROSPACE, INC	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. KEN SPAIN		Date of Receipt MM / DD / YYYY 02 / 16 / 2014 Transaction ID : SA11.15362327
Mailing Address 322 SOUTH CAROLINA AVE SE		Amount of Each Receipt this Period 250.00
City WASHINGTON	State DC	Zip Code 20003-4223
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer PRIVATE EQUITY GROWTH CAPITAL COUNCIL	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. DR. ROBERT L. SPANGLER		Date of Receipt MM / DD / YYYY 02 / 06 / 2014 Transaction ID : SA11.15342727
Mailing Address 84 PINWOOD DRIVE		Amount of Each Receipt this Period 250.00
City GARDNER	State MA	Zip Code 01440-3143
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. JOHN SPEARS

Mailing Address 1285 GULF SHORE BLVD N
APT. 7A

City State Zip Code
NAPLES FL 34102-4903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWEEDY, BROWN CO. LLC INVESTMENT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA11.15373733

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DR. WILLIAM N. SPELLACY

Mailing Address 516 MIRABAY BLVD.

City State Zip Code
APOLLO BEACH FL 33572-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIV SOUTH FLORIDA PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014
Transaction ID : SA11.15362873

Amount of Each Receipt this Period
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. WILLIAM B. SPENCER

Mailing Address 20906 TRINITY SQUARE

City State Zip Code
STERLING VA 20165-7234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
POTOMAC STRATEGIC DEVELOPMENT INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15385529

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. NICHOLAS J. ST GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 971 GEORGIA AVE
 City WINTER PARK State FL Zip Code 32789-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15361419
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

B. ELLSWORTH STANTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 PARK AVE APT 7C
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367353
 Amount of Each Receipt this Period 75.00
 CONTRIBUTION

C. ELLSWORTH STANTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 PARK AVE APT 7C
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15384595
 Amount of Each Receipt this Period 75.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. FRANK F. STANTON
 Mailing Address 18322 CRYSTAL LAKES DR.
 City State Zip Code
 NORTH ROYALTON OH 44133-6088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WELL POINT SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11.15362431
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. GREGORY B. STARKS
 Mailing Address 2300 FIRST AVENUE
 City State Zip Code
 DODGE CITY KS 67801-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COLDWELL BANKER HANCOCKS REALTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 276.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15355737
 Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. GREGORY B. STARKS
 Mailing Address 2300 FIRST AVENUE
 City State Zip Code
 DODGE CITY KS 67801-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COLDWELL BANKER HANCOCKS REALTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 276.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364730
 Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID H. STASHIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376768
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. ELIZABETH F. STEELE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 GALLOWAY RDG APT. G207
 City PITTSBORO State NC Zip Code 27312-8669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15344931
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. MRS. JEAN B. STEFANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 12700 N 1ST ST
 City PARKER State CO Zip Code 80134-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15373739
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MATTHEW J. STEGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 SALT LAKE DR.
 City TARPON SPRINGS State FL Zip Code 34689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15372108
 Amount of Each Receipt this Period 55.00
 CONTRIBUTION

B. MATTHEW J. STEGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 SALT LAKE DR.
 City TARPON SPRINGS State FL Zip Code 34689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374431
 Amount of Each Receipt this Period 55.00
 CONTRIBUTION

C. SHIMON STEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 NEW HAMPSHIRE AVE, NW, 12TH FL
 City WASHINGTON State DC Zip Code 20037-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLANK ROME GOVERNMENT RELATIONS Occupation LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381652
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT STENEHJEM
 Full Name (Last, First, Middle Initial)
 Mailing Address 8160 OLD HWY. 2
 City STANLEY State ND Zip Code 58784-9002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation CONSULTANT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 550.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15379632
 Amount of Each Receipt this Period 550.00
 CONTRIBUTION

B. MR. PER S. STENSBY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1736
 City NEW LONDON State NH Zip Code 03257-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11.15359550
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MR. ROGER F. STETSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5760 GALLERY COURT
 City WEST DES MOINES State IA Zip Code 50266-6629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15365739
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 637
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WALTER D. STEVENSON III
 Full Name (Last, First, Middle Initial)
 Mailing Address 7819 COCOBAY COURT
 City State Zip Code
 NAPLES FL 34108-6509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379445
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. GORDON STEWART
 Full Name (Last, First, Middle Initial)
 Mailing Address 614 BAYTREE CT
 City State Zip Code
 AUGUSTA GA 30907-9131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15340254
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MR. JOHN H. STODDARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8701 ANCHORAGE DRIVE
 City State Zip Code
 MIRAMAR BEACH FL 32550-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384242
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. SHARON STOKES
Full Name (Last, First, Middle Initial)

Mailing Address 315 MORGANTOWN STREET

City UNIONTOWN	State PA	Zip Code 15401-4871
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	11	/	2014

Transaction ID : SA11.15356908

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. SCOTT STOSSER
Full Name (Last, First, Middle Initial)

Mailing Address 3169 COMMERCE ST.

City BLACKSBURG	State VA	Zip Code 24060-6673
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	06	/	2014

Transaction ID : SA11.15342582

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. SCOTT STOSSER
Full Name (Last, First, Middle Initial)

Mailing Address 3169 COMMERCE ST.

City BLACKSBURG	State VA	Zip Code 24060-6673
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	18	/	2014

Transaction ID : SA11.15364649

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. STEVEN S. STURGEN

Mailing Address 3625 BERNARD STREET #20

City State Zip Code
BAKERSFIELD CA 93306-3064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENGO WIRELINE SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374747

Amount of Each Receipt this Period
257.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PREDRAG SUBOTIC

Mailing Address 8662 MIDLAND PKWY

City State Zip Code
JAMAICA NY 11432-3042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15364647

Amount of Each Receipt this Period
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. PREDRAG SUBOTIC

Mailing Address 8662 MIDLAND PKWY

City State Zip Code
JAMAICA NY 11432-3042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366960

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 307.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 323 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MRS. ROZENE R. SUPPLE
 Mailing Address 1850 SMOKE TREE LANE
 City State Zip Code
 PALM SPRINGS CA 92264-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED RADIO STATION THEATRE OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 614.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15367911
 Amount of Each Receipt this Period
 507.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. SAM L. SUSSER
 Mailing Address 4525 AYERS STREET
 City State Zip Code
 CORPUS CHRISTI TX 78415-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SUSSER HOLDINGS CORPORATION PRESIDENT AND CEO
 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
 02 / 28 / 2014
Transaction ID : SA11.15388819
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. MICHAEL SWEENEY
 Mailing Address 35081 KENAI SPUR HWY.
 City State Zip Code
 SOLDOTNA AK 99669-7621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15380594
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3507.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 637
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM SWEET

Mailing Address 3415 OAKWOOD COURT

City MORGAN HILL State CA Zip Code 95037-6922

FEC ID number of contributing federal political committee. **C**

Name of Employer TECHINSIGHTS, OTTAWA CANADA Occupation PATENT BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374791

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. FREDERICK A. SWEGLES JR.

Mailing Address 2947 MILITARY ST

City PORT HURON State MI Zip Code 48060-6630

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15362538

Amount of Each Receipt this Period
157.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. LEWIS V. SWEZY

Mailing Address 1817 SE 7TH STREET

City FT. LAUDERDALE State FL Zip Code 33316-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer SWEZY REALTY Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15355100

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5407.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. JAMES B. SWIRE

Mailing Address 4 MILL POND LANE

City State Zip Code
 NEW ROCHELLE NY 10805-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15345943

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JAMES B. SWIRE

Mailing Address 4 MILL POND LANE

City State Zip Code
 NEW ROCHELLE NY 10805-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2014
Transaction ID : SA11.15373474

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JAMES B. SWIRE

Mailing Address 4 MILL POND LANE

City State Zip Code
 NEW ROCHELLE NY 10805-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15380651

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 326 OF 637
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JAMES B. SWIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 MILL POND LANE
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15380750
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

B. JAMES B. SWIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 MILL POND LANE
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15381590
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

C. MR. JOHN W. SWOPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 MONTGOMERY AVENUE APT 408
 City BRYN MAWR State PA Zip Code 19010-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15350517
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. TERRY W. TALLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 W CAMP GROUND RD
 City EVANSVILLE State IN Zip Code 47710-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15368161
 Amount of Each Receipt this Period 600.00
 CONTRIBUTION

B. DHUANE TANSILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3475 N SAVANNAH PL
 City VERO BEACH State FL Zip Code 32963-4791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2014
Transaction ID : SA11.15338263
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MR. THOMAS N. TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 25252 BRIGANTINE DR.
 City DANA POINT State CA Zip Code 92629-1424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 07 / 2014
Transaction ID : SA11.15346773
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 637
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. THOMAS N. TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 25252 BRIGANTINE DR.
 City State Zip Code
 DANA POINT CA 92629-1424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370003
 Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

B. MR. MARK TERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 HOLLIDAY STE 216
 City State Zip Code
 WICHITA FALLS TX 76301-7143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FALLS HOME HEALTH CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15390268
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MARGERY F. TERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 EAST LINTON BLVD. APT 521
 City State Zip Code
 DELRAY BEACH FL 33483-5041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15352296
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ROBERT C. THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 PATTI LYNN LN.
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377072
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. MR. ROBERT C. THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 PATTI LYNN LN.
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15377206
 Amount of Each Receipt this Period
 1.00
 CONTRIBUTION

C. MR. EDWARD T. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 COTSWOLD DR
 City NORTH SALEM State NY Zip Code 10560-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15367912
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 451.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 330 OF 637
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. LEX THOMPSON DVM

Mailing Address **PO BOX 427**

City **IMPERIAL** State **NE** Zip Code **69033-0427**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VETERINARY SERVICES** Occupation **DOCTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.00**

Date of Receipt
02 / 05 / 2014
Transaction ID : SA11.15331781

Amount of Each Receipt this Period
307.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. LYNN THOMPSON

Mailing Address **1555 EAST INDEPENDENCE AVE.**

City **SPRINGFIELD** State **MO** Zip Code **65804-3739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
02 / 27 / 2014
Transaction ID : SA11.15381182

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. EDMUND B. THORNTON

Mailing Address **P.O. BOX 1**

City **OTTAWA** State **IL** Zip Code **61350-0001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
02 / 25 / 2014
Transaction ID : SA11.15378783

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **1557.00**

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 637
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PAUL M. THRIFT

Mailing Address 901 WABASH AVENUE
SUITE 300

City TERRE HAUTE State IN Zip Code 47807-3233

FEC ID number of contributing federal political committee. **C**

Name of Employer THOMPSON THRIFT DEVELOPMENT Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SA11.15388815

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JOHN E TICHENOR

Mailing Address P.O. BOX 453

City VALLECITO State CA Zip Code 95251-0453

FEC ID number of contributing federal political committee. **C**

Name of Employer RH PROPERTIES Occupation SMALL BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SA11.15331535

Amount of Each Receipt this Period
-25.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)
C. JOHN E TICHENOR

Mailing Address P.O. BOX 453

City VALLECITO State CA Zip Code 95251-0453

FEC ID number of contributing federal political committee. **C**

Name of Employer RH PROPERTIES Occupation SMALL BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SA11.15331536

Amount of Each Receipt this Period
-25.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 9950.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. PHYLLIS O. TILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3868 EXMOOR CIR.
 City SACRAMENTO State CA Zip Code 95864-5905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 02 / 21 / 2014
Transaction ID : SA11.15374284
 Amount of Each Receipt this Period: 201.00
CONTRIBUTION

B. MR. WILLIAM M. TILTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3745 BECKET DR
 City COLORADO SPRINGS State CO Zip Code 80906-4811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 11 / 2014
Transaction ID : SA11.15358774
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. DR. KENNETH G. TOMBERLIN M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3817 FORRESTGATE DR
 City WINSTON SALEM State NC Zip Code 27103-2930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **WINSTON BONE & JOINT SURGICAL ASSOC** Occupation: **PRESIDENT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 02 / 27 / 2014
Transaction ID : SA11.15379572
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 651.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. ROGER TOMPKINS

Mailing Address 8200 SHADE TREE CT

City Jacksonville State FL Zip Code 32256-7153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379450

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. ARMAND S. TORON JR.

Mailing Address 1 ORIENT WAY
APT 512

City RUTHERFORD State NJ Zip Code 07070-2593

FEC ID number of contributing federal political committee. **C**

Name of Employer GRAYTOR PRINTING CO., INC. Occupation PRINTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15343618

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ROBERT S. TROTH

Mailing Address 3003 GULF SHORE BLVD N APT 301

City NAPLES State FL Zip Code 34103-3912

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370717

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. MARGARET H. TRUESDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2951 CAMINO DE LAS PIEDRAS
 City State Zip Code
 EL CAJON CA 92019-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15373499
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MS. MARGARET H. TRUESDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2951 CAMINO DE LAS PIEDRAS
 City State Zip Code
 EL CAJON CA 92019-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374774
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

C. MR. WARREN TRYON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 NEW HAMPSHIRE AVE NW STE. 300
 City State Zip Code
 WASHINGTON DC 20036-6812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROBERTS REHAB & GRADLER LLC SENIOR POLICY ADVISOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373492
 Amount of Each Receipt this Period
 1200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1450.00
TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. JAMIE TUCKER		Date of Receipt MM / DD / YYYY 02 / 04 / 2014 Transaction ID : SA11.15331924
Mailing Address 1333 NEW HAMPSHIRE AVE. NW		Amount of Each Receipt this Period 1000.00
City WASHINGTON	State DC	Zip Code 20036-1500
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer AKIN GUMP	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MR. RICHARD TUCKER		Date of Receipt MM / DD / YYYY 02 / 24 / 2014 Transaction ID : SA11.15390219
Mailing Address 2552 E ALAMEDA AVE #100		Amount of Each Receipt this Period 250.00
City DENVER	State CO	Zip Code 80209-3322
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MR. ROBERT A. TUCKER		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15346265
Mailing Address PO BOX 732		Amount of Each Receipt this Period 257.00
City BROKEN BOW	State OK	Zip Code 74728-0732
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer JIMMIE TUCKER TRUCKING, INC.	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.00	

SUBTOTAL of Receipts This Page (optional).....▶	1507.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BESSIE P. TUFTS
Full Name (Last, First, Middle Initial)

Mailing Address 866 W SOUTHWOOD DR.

City	State	Zip Code
WOODLAND	CA	95695-6844

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374432

Amount of Each Receipt this Period
 540.00

CONTRIBUTION

B. H. J. TUGGEY
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DR

City	State	Zip Code
TROPHY CLUB	TX	76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15374778

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. H. J. TUGGEY
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DR

City	State	Zip Code
TROPHY CLUB	TX	76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383958

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	740.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DR. FRANK TULL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 COTTON TRACE ST
 City State Zip Code
 SIKESTON MO 63801-1925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15369546
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. AMY TYKESON
 Full Name (Last, First, Middle Initial)
 Mailing Address 63090 SHERMAN RD
 City State Zip Code
 BEND OR 97701-5750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BENDBROADBAND CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15355102
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. MRS. IRENE ULIVI
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 GRAND BAY DRIVE #1401
 City State Zip Code
 KEY BISCAWAYNE FL 33149-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SAZINGG COMPANY DESIGNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15381179
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DOROTHY L. ULRICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 1702 CLARK DR.
 City WENATCHEE State WA Zip Code 98801-1494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374387
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MS. ELINOR J. URSTADT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 BEECHWOOD ROAD
 City BRONXVILLE State NY Zip Code 10708-3202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11.15355014
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. KATHRYN C. VALLEAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 4839 MEADOW DRIVE
 City VAIL State CO Zip Code 81657-5462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15365226
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. WILLIAM VAN DYKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9040 N BAYSIDE DR
 City MILWAUKEE State WI Zip Code 53217-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376526
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. THOMAS VAN HOOSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6850 NW 2ND AVE. # 29
 City BOCA RATON State FL Zip Code 33487-2334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2014
Transaction ID : SA11.15344719
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. WILLIAM VANDERVELDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7903 TRINITY CIR.
 City TINLEY PARK State IL Zip Code 60487-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.15371487
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOE VANSICKLE
Full Name (Last, First, Middle Initial)

Mailing Address 6512 W SOUTH COUNTYLINE RD.

City	State	Zip Code
PERRINTON	MI	48871-9501

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15360834

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MS. VIRGINIA VICKERS
Full Name (Last, First, Middle Initial)

Mailing Address 2507 S 16TH PLACE

City	State	Zip Code
TULSA	OK	74012-3019

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FIRSTITLE & ABSTRACT SERVICES LLC	ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15331962

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

C. MS. VIRGINIA VICKERS
Full Name (Last, First, Middle Initial)

Mailing Address 2507 S 16TH PLACE

City	State	Zip Code
TULSA	OK	74012-3019

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FIRSTITLE & ABSTRACT SERVICES LLC	ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15376025

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. JAMES H. VIDAL JR.

Mailing Address 3747 PEACHTREE ROAD NE APT 2025

City	State	Zip Code
ATLANTA	GA	30319-1337

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15375531

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. PAULINE VIGUE

Mailing Address PO BOX 2

City	State	Zip Code
JUNCTION CITY	OH	43748-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15392713

Amount of Each Receipt this Period
 -25.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)
C. MR. ROBERT C. VINCENT

Mailing Address P.O. BOX 7340

City	State	Zip Code
AMARILLO	TX	79114-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1051.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378541

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. ALEXANDER VON PERFALL		Date of Receipt
Mailing Address 190 E. 72ND STREET APARTMENT 15C		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City NEW YORK	State NY	Zip Code 10021-4374
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.1538821
Name of Employer ROYALTY PHARMACY	Occupation VICE PRESIDENT, INVESTOR RELATIONS &	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	CONTRIBUTION

Full Name (Last, First, Middle Initial) B. MR. MICHAEL WADDELL		Date of Receipt
Mailing Address 3008 FAIRMONT ST.		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City FALLS CHURCH	State VA	Zip Code 22042-1309
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15331643
Name of Employer PRIZUM	Occupation MANAGING PARTNER	Amount of Each Receipt this Period <input type="text" value="207.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="207.00"/>	CONTRIBUTION

Full Name (Last, First, Middle Initial) C. MS. ELIZABETH R. WADE		Date of Receipt
Mailing Address 5364 CALLE REAL		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City SANTA BARBARA	State CA	Zip Code 93111-1685
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.15360531
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	Amount of Each Receipt this Period <input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="221.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1242.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. ELIZABETH R. WADE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5364 CALLE REAL
 City State Zip Code
 SANTA BARBARA CA 93111-1685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374390
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

B. MS. ELIZABETH R. WADE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5364 CALLE REAL
 City State Zip Code
 SANTA BARBARA CA 93111-1685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378564
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MS. ELIZABETH R. WADE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5364 CALLE REAL
 City State Zip Code
 SANTA BARBARA CA 93111-1685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383993
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MS. JOANNA WAITE

Mailing Address 101 PINE CREEK AVE

City State Zip Code
JERSEY SHORE PA 17740-7650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11.15359778

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JERRY W. WALDRON

Mailing Address 633 SAND HILL CHURCH ROAD

City State Zip Code
DOUGLAS GA 31533-6715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15366809

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ELBRIDGE GERRY WALKER

Mailing Address 30588 NORTH MILLER ROAD

City State Zip Code
SCOTTSDALE AZ 85266-1826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WALDEC ENTERPRISES INC COMMERCIAL FISHING & REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15378739

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 345 OF 637
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JAMES WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 4202 TUSCANY CT

City	State	Zip Code
BALTIMORE	MD	21210-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331003

Amount of Each Receipt this Period
 82.00

CONTRIBUTION

B. MR. JAMES WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 4202 TUSCANY CT

City	State	Zip Code
BALTIMORE	MD	21210-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15337488

Amount of Each Receipt this Period
 107.00

CONTRIBUTION

C. MR. JAMES WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 4202 TUSCANY CT

City	State	Zip Code
BALTIMORE	MD	21210-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11.15373571

Amount of Each Receipt this Period
 607.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	796.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 346 OF 637
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. JAMES WALKER		Date of Receipt MM / DD / YYYY 02 / 27 / 2014 Transaction ID : SA11.15379588
Mailing Address 4202 TUSCANY CT		Amount of Each Receipt this Period 550.00
City BALTIMORE	State MD	Zip Code 21210-2933
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.00	

Full Name (Last, First, Middle Initial) B. MRS. MARIANNE M. WALKER		Date of Receipt MM / DD / YYYY 02 / 20 / 2014 Transaction ID : SA11.15372161
Mailing Address 65895 HWY. 20		Amount of Each Receipt this Period 201.00
City BEND	State OR	Zip Code 97701-9190
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation RANCHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) C. GEORGE WARD		Date of Receipt MM / DD / YYYY 02 / 21 / 2014 Transaction ID : SA11.15374370
Mailing Address P.O. BOX 163		Amount of Each Receipt this Period 1000.00
City DESTIN	State FL	Zip Code 32540-0163
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1751.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. WILLIAM B. WARDEN

Mailing Address 4332 ALFRIENDS TRL

City State Zip Code
VIRGINIA BEACH VA 23455-6102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374638

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. DENNERT O. WARE

Mailing Address 317 LIMESTONE CREEK

City State Zip Code
SAN ANTONIO TX 78232-3503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CELONOVA BIOSCIENCES EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331697

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. WILLIAM J. WARWICK

Mailing Address 1059 OCEAN RIDGE DR

City State Zip Code
WILMINGTON NC 28405-5287

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15382912

Amount of Each Receipt this Period
600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HOWARD O. WATKINS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2145 BIG PINE DRIVE
 City HIAWASSEE State GA Zip Code 30546-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11.15357290
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. JAY WATTLES JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 271 CRAG BURN DR
 City EAST AURORA State NY Zip Code 14052-9469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11.15331183
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. ROBERT W. WEBSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 924 18TH. ST. S
 City ARLINGTON State VA Zip Code 22202-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15384274
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JAMES D. WEDDLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 FOREST RIDGE PL
 City SAINT LOUIS State MO Zip Code 63105-3007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EDWARD JONES Occupation MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 20 / 2014
Transaction ID : SA11.15376773
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. MR. ROBERT M. WEEKLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 621 S BARRINGTON AVENUE #306
 LOS ANGELES CA 90049
 City LOS ANGELES State CA Zip Code 90049-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOWE DEVELOPMENT CORPORATION Occupation REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15388805
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

C. MRS. MICHAEL W. WEGMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 9
 City UMBARGER State TX Zip Code 79091-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15367582
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 15250.00
TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHN WEIGLHOFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 JOSIE PERKINS LANE
 City LYME State CT Zip Code 06371-3054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15390235
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MS. LULA V. WEISENFELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 BROWNWOOD EST.
 City FORT SMITH State AR Zip Code 72916-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.15344728
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. MS. LULA V. WEISENFELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 BROWNWOOD EST.
 City FORT SMITH State AR Zip Code 72916-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15361290
 Amount of Each Receipt this Period
 70.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. NANCY D. WEISS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8672 N BOBBY JONES DR
 City TUCSON State AZ Zip Code 85742-9129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2014
Transaction ID : SA11.15343648
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. WILLIAM E. WELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3325 PARKS SCHOOL ROAD
 City DUNLAP State IL Zip Code 61525-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15354076
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. ROBERT M. WESCOTT SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 LUELLA DR
 City PLEASANT HILL State CA Zip Code 94523-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11.15346617
 Amount of Each Receipt this Period
 101.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	601.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BEN WESSELS
Full Name (Last, First, Middle Initial)

Mailing Address 16 LINDEN HILL DRIVE

City CRESCENT SPRINGS State KY Zip Code 41017-1308

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 26 / 2014
Transaction ID : SA11.15380307

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. DR. CORNELIS G. WESSELING
Full Name (Last, First, Middle Initial)

Mailing Address 904 SANTA CRUZ CT.

City ROSEVILLE State CA Zip Code 95661-5322

FEC ID number of contributing federal political committee. **C**

Name of Employer CASE MEDICAL GRP INC Occupation ANESTHESIOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 19 / 2014
Transaction ID : SA11.15371941

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. BROWNIE D. WEST
Full Name (Last, First, Middle Initial)

Mailing Address 13601 DUPREE WORTHEY RD

City HARVEST State AL Zip Code 35749-7317

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15367057

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 353 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. DAVID D. WESTRICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 LIONS HEAD CT
 City O FALLON State MO Zip Code 63368-6678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ELECTRICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15373636
 Amount of Each Receipt this Period 507.00
 CONTRIBUTION

B. MR. STEVE WHALEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1259 KELLUM CREEK RD
 City SEVIERVILLE State TN Zip Code 37876-1715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15383601
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MR. THOMAS B. WHEELER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 GULF SHORE BLVD N APT 502
 City NAPLES State FL Zip Code 34102-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.15375785
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1207.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TONI WHEELER
Full Name (Last, First, Middle Initial)

Mailing Address 4631 S RACINE AVE

City CHICAGO State IL Zip Code 60609-3322

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15379571

Amount of Each Receipt this Period
 950.00

CONTRIBUTION

B. GAY C. WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 403 CAMELOT DRIVE

City SIMPSONVILLE State SC Zip Code 29681-5743

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15359823

Amount of Each Receipt this Period
 5.00

CONTRIBUTION

C. MR. WALTER R. WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 4833 MCDONALD DRIVE CIRCLE N

City STILLWATER State MN Zip Code 55082-2150

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLIANZ LIFE INS. COMPANY Occupation PRESIDENT & CEO

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
 02 / 28 / 2014
Transaction ID : SA11.15388837

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3455.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MS. GENEVA S. WHITLOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 507 W OAK DR.
 City ROUND ROCK State TX Zip Code 78664-3028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11.15361351
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. MR. MARK DOUGLAS WHITLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1709 SHERBURNE DR
 City KELLER State TX Zip Code 76262-8906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15376415
 Amount of Each Receipt this Period 75.00
 CONTRIBUTION

C. MR. MARK DOUGLAS WHITLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1709 SHERBURNE DR
 City KELLER State TX Zip Code 76262-8906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 27 / 2014
Transaction ID : SA11.15380660
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. MARK DOUGLAS WHITLEY		Date of Receipt
Mailing Address 1709 SHERBURNE DR		MM / DD / YYYY 02 / 28 / 2014
City	State	Zip Code
KELLER	TX	76262-8906
FEC ID number of contributing federal political committee.		Transaction ID : SA11.15381571
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		325.00
Name of Employer		CONTRIBUTION
RETIRE	Occupation	
RETIRE	RETIRE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		225.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS. JANE F. WIELAND		Date of Receipt
Mailing Address 1800 RIVIERA LN		MM / DD / YYYY 02 / 28 / 2014
City	State	Zip Code
O FALLON	IL	62269-6696
FEC ID number of contributing federal political committee.		Transaction ID : SA11.15381675
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		25.00
Name of Employer		CONTRIBUTION
HOMEMAKER	Occupation	
HOMEMAKER	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		225.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NAT WIENECKE		Date of Receipt
Mailing Address INFO REQUESTED		MM / DD / YYYY 02 / 27 / 2014
City	State	Zip Code
NA		
FEC ID number of contributing federal political committee.		Transaction ID : SA11.15380674
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		250.00
Name of Employer		CONTRIBUTION
INFORMATION REQUESTED PER BEST EFF	Occupation	
INFORMATION REQUESTED PER BEST EFF	INFORMATION REQUESTED PER BEST EFF	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		250.00
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. DELMAR WILKINS		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15392722
Mailing Address 807 W. LAKE RD		Amount of Each Receipt this Period -100.00
City GUTHRIE	State OK	Zip Code 73044-6690
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation OWNER: WILKINS AUTO BODY	CHECK RETURNED BY BANK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. MR. CARL M. WILLIAMS		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15352416
Mailing Address 2495 S QUEBEC ST APT 28		Amount of Each Receipt this Period 115.00
City DENVER	State CO	Zip Code 80231-6067
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. MR. CARL M. WILLIAMS		Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11.15354974
Mailing Address 2495 S QUEBEC ST APT 28		Amount of Each Receipt this Period 125.00
City DENVER	State CO	Zip Code 80231-6067
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. CARL M. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2495 S QUEBEC ST APT 28
 City DENVER State CO Zip Code 80231-6067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15374152
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

B. MR. WALTER E. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 181 PARKVIEW AVE
 City DALY CITY State CA Zip Code 94014-3871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15378143
 Amount of Each Receipt this Period 45.00
 CONTRIBUTION

C. MR. WILLIAM L. WILLOUGHBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7136 MATHEW ST
 City GREENBELT State MD Zip Code 20770-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15374775
 Amount of Each Receipt this Period 150.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	395.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. ARTHUR L. WILMES
Full Name (Last, First, Middle Initial)

Mailing Address 7904 TRADERS HOLLOW LANE
APARTMENT L

City INDIANAPOLIS State IN Zip Code 46278-1291

FEC ID number of contributing federal political committee. **C**

Name of Employer MILLIMAN INC. CONSULTING Occupation ACTUARY/PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt
02 / 28 / 2014
Transaction ID : SA11.15388816

Amount of Each Receipt this Period
32400.00

CONTRIBUTION

B. W. PATRICK WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1701 16TH STREET, NW #125

City WASHINGTON State DC Zip Code 20009-3110

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BABCOCK & WILCOX COMPANY Occupation GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15367627

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. PETER J. WINDERS
Full Name (Last, First, Middle Initial)

Mailing Address 4876 QUILL CT

City PALM HARBOR State FL Zip Code 34685-3699

FEC ID number of contributing federal political committee. **C**

Name of Employer CARLTON FIELDS JORDEN BURT Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
02 / 03 / 2014
Transaction ID : SA11.15331711

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 32900.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PETER J. WINDERS

Mailing Address 4876 QUILL CT

City PALM HARBOR State FL Zip Code 34685-3699

FEC ID number of contributing federal political committee. **C**

Name of Employer CARLTON FIELDS JORDEN BURT Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 25 / 2014

Transaction ID : SA11.15376432

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. CAROLYN R. WINDLE

Mailing Address 1761 CREEK CROSSING RD

City VIENNA State VA Zip Code 22182-2127

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11.15343889

Amount of Each Receipt this Period
265.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. SAM WITHIAM

Mailing Address P.O. BOX 1368

City CUSHING State OK Zip Code 74023-1368

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11.15350761

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **615.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 361 OF 637
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. WILLIAM WITTER		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.15346128
Mailing Address 234 S. 68 STREET		Amount of Each Receipt this Period 5000.00
City BOULDER	State CO	Zip Code 80303-4305
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. JEAN WITTNER		Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11.15379381
Mailing Address 1220 PARK STREET NORTH		Amount of Each Receipt this Period 250.00
City ST. PETERSBURG	State FL	Zip Code 33710-4340
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer WITTNER CENTRE PARTNERS	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. JEANNE L. WOLFSTONE		Date of Receipt MM / DD / YYYY 02 / 06 / 2014 Transaction ID : SA11.15340925
Mailing Address 9120 NE 15TH ST		Amount of Each Receipt this Period 251.00
City BELLEVUE	State WA	Zip Code 98004-3305
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

SUBTOTAL of Receipts This Page (optional).....▶	5501.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JEANNE L. WOLFSTONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9120 NE 15TH ST
 City BELLEVUE State WA Zip Code 98004-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **501.00**

Date of Receipt **02 / 21 / 2014**
Transaction ID : SA11.15374383
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

B. MRS. PEGGY WOLTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7517 DUNBARTON AVENUE
 City LOS ANGELES State CA Zip Code 90045-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA11.15373500
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

C. MRS. PEGGY WOLTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7517 DUNBARTON AVENUE
 City LOS ANGELES State CA Zip Code 90045-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA11.15381010
 Amount of Each Receipt this Period **200.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. RICHARD D. WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5715 SUNSET LANE
 City INDIANAPOLIS State IN Zip Code 46228-1447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15362494
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. RUSS WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8400 SHADY OAKS DRIVE
 City NORTH RICHLAND HILLS State TX Zip Code 76182-8450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HEALTHCARE SVC CORP Occupation SECURITY DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 21 / 2014
Transaction ID : SA11.15367887
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. RUSS WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8400 SHADY OAKS DRIVE
 City NORTH RICHLAND HILLS State TX Zip Code 76182-8450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HEALTHCARE SVC CORP Occupation SECURITY DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 26 / 2014
Transaction ID : SA11.15376628
 Amount of Each Receipt this Period 125.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. DIANE S. WOODARD
Full Name (Last, First, Middle Initial)

Mailing Address 1616 DANDRIDGE ST SW

City DECATUR State AL Zip Code 35601-3728

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11.15362067

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. MRS. DIANE S. WOODARD
Full Name (Last, First, Middle Initial)

Mailing Address 1616 DANDRIDGE ST SW

City DECATUR State AL Zip Code 35601-3728

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11.15374470

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

C. MRS. ANN E. WOOTEN
Full Name (Last, First, Middle Initial)

Mailing Address 2401 LEWIS GROVE LN.

City RALEIGH State NC Zip Code 27608-1380

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11.15362863

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. DENIS WORLEY

Mailing Address 4400 ISLAND PL. APT. 203

City ANNANDALE State VA Zip Code 22003-4880

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 02 / 25 / 2014
Transaction ID : SA11.15378548

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JAMES WRIGHT

Mailing Address P.O. BOX 1018
 P.O. BOX 1018

City IONE State CA Zip Code 95640-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 201.00

Date of Receipt
 02 / 10 / 2014
Transaction ID : SA11.15350029

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. DOROTHY WURLITZER

Mailing Address 10 CRYSTAL SPRINGS ROAD UNIT 1407

City SAN MATEO State CA Zip Code 94402-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 02 / 25 / 2014
Transaction ID : SA11.15378152

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 OF 637
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. JOHN WYMER JR.		Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11.15376437
Mailing Address 8C 1040 N LAKE SHORE DRIVE		Amount of Each Receipt this Period 1000.00
City CHICAGO	State IL	Zip Code 60611-1165
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MR. GEORGE C. WYNNE		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15384152
Mailing Address 12348 MORNING CREEK RD		Amount of Each Receipt this Period 200.00
City GLEN ALLEN	State VA	Zip Code 23059-7100
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer KEYSTONE INSURERS GROUP	Occupation INSURANCE EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. MS. ANNE YOUNG		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11.15390136
Mailing Address 3709 BRYN MAWR		Amount of Each Receipt this Period 1000.00
City DALLAS	State TX	Zip Code 75225-7217
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. GRANT C. YOUNG

Mailing Address 23633 CARROLL RD

City LANARK State IL Zip Code 61046-8890

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11.15370291

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AVA N. ZAPP

Mailing Address 5100 KELL BLVD APT 224

City WICHITA FALLS State TX Zip Code 76310-1753

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15383757

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. IMAAD ZUBERI

Mailing Address 10166 RUSH STREET

City EL MONTE State CA Zip Code 91733-3224

FEC ID number of contributing federal political committee. **C**

Name of Employer AVENUE VENTURES Occupation PRIVATE EQUITY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2014
Transaction ID : SA11.15362385

Amount of Each Receipt this Period
32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 32700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. CHOCTAW NATION OF OKLAHOMA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1210
 City State Zip Code
 DURANT OK 74702-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 16200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388808
 Amount of Each Receipt this Period
 16200.00
 CONTRIBUTION

B. FLIGHTOPTIONS 1, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 29425 CHAGRIN BLVD., SUITE 300
 City State Zip Code
 PEPPER PIKE OH 44122-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 02 / 10 / 2014
Transaction ID : SA11.15359919
 Amount of Each Receipt this Period
 10000.00
 CONTRIBUTION
 SEE PARTNERSHIP ATTRIBUTION

C. MR. JEFFREY C. HURT
 Full Name (Last, First, Middle Initial)
 Mailing Address 29425 CHAGRIN BOULEVARD
 SUITE 300
 City State Zip Code
 PEPPER PIKE OH 44122-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DIVERSIFIED RESOURCES PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359920
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION
[MEMO ITEM]
 PARTNERSHIP ATTRIBUTON

SUBTOTAL of Receipts This Page (optional)..... ▶ 26200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 369 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. WILLIAM A. HURT JR.

Mailing Address 29425 CHAGRIN BOULEVARD
SUITE 300

City BEACHWOOD State OH Zip Code 44122-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer III WILLIAMS, LLC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359921

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTON

Full Name (Last, First, Middle Initial)
B. MORONGO BAND OF MISSION INDIANS

Mailing Address 11581 POTRERO ROAD

City BANNING State CA Zip Code 92220-6946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014
Transaction ID : SA11.15379440

Amount of Each Receipt this Period
32400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. POARCH BAND OF CREEK INDIANS

Mailing Address 5811 JACK SPRINGS ROAD

City ATMORE State AL Zip Code 36502-5025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32400.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15373482

Amount of Each Receipt this Period
32400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	64800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. SENECA NATION OF INDIANS
 Mailing Address 3582 CENTER ROAD
 PO BOX 231
 City SALAMANCA State NY Zip Code 14779-9739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373478
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. SOBOBA BAND OF LUISENO INDIANS
 Mailing Address PO BOX 487
 City SAN JACINTO State CA Zip Code 92581-0487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373483
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. THE CHICKASAW NATION
 Mailing Address P.O. BOX 1548
 City ADA State OK Zip Code 74821-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373477
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 97200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 OF 637
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. VOTESANE PAC

Mailing Address **PO BOX 2713**

City **ALEXANDRIA** State **VA** Zip Code **22301-0713**

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39900.00

Date of Receipt
02 / 18 / 2014

Transaction ID : SA11.15390613

Amount of Each Receipt this Period
6175.00

CONDUIT

[MEMO ITEM]
EARMARKED CONTRIBUTIONS FROM CONDUIT

Full Name (Last, First, Middle Initial)
B. DEBORAH BAISDEN

Mailing Address **3300 CHAPPELL PLACE**

City **VIRGINIA BEACH** State **VA** Zip Code **23452-6290**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRUDENTIAL TOWNE REALTY
BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 18 / 2014

Transaction ID : SA11.15390624

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. LARRY BLACK

Mailing Address **2827 VENEZIA TER.**

City **CHINO HILLS** State **CA** Zip Code **91709-6603**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C-21 E-N ACHIEVERS REALTY
REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 18 / 2014

Transaction ID : SA11.15390615

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... **1000.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PHILIP CHILES

Mailing Address **2244 WESTROAD DR**

City **SPRINGFIELD** State **IL** Zip Code **62711-9611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REAL ESTATE GROUP** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15390619

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. ALVIN COLLINS

Mailing Address **P.O. BOX 277**

City **ANDREWS** State **TX** Zip Code **79714-0277**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LEGACY REAL ESTATE** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15390621

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. MR. RICHARD T. FRYER

Mailing Address **P.O. BOX 2813**

City **WINTER PARK** State **FL** Zip Code **32790-2813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **IFREC REAL ESTATE SCHOOLS** Occupation **REAL ESTATE SCHOOL OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15390625

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ **1500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. VINCENT MALTA

Mailing Address 1012 CAPUCHINO AVENUE

City State Zip Code
 BURLINGAME CA 94010-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 MALTA & CO. INC. REALTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15390617

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. MR. WALTER T. MC DONALD

Mailing Address 2249 EL CAPITAN DR.

City State Zip Code
 RIVERSIDE CA 92506-4615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 WALT MC DONALD REAL ESTATE REALTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15390618

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. JOSEPH MCCANN

Mailing Address 13581 WESTBROOK RD

City State Zip Code
 PLYMOUTH MI 48170-2442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 COLDWELL BANKER WEIR MANUEL REALTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15390614

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TAMMY NEWLAND-SHISHIDO
 Full Name (Last, First, Middle Initial)
 Mailing Address 11951 PINE STREET
 City ROSSMOOR State CA Zip Code 90720-4164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KELLER WILLIAMS REALTY Occupation REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15390620
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

B. JOHN POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1689 S CRATER RD
 City PETERSBURG State VA Zip Code 23805-2714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LONG & FOSTER REAL ESTATE INC Occupation REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15390626
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

C. DON SCORDINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1013 E OMAHA AVE
 City FRESNO State CA Zip Code 93720-2264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REALTY CONCEPTS Occupation REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11.15390622
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. TERRIE SUIT

Mailing Address 13 COLYER ROAD

City State Zip Code
FREDERICKSBURG VA 22406-4206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VIRGINIA ASSOCIATION OF REALTORS STAFF

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15390623

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. PAT ZICARELLI

Mailing Address 18850 VENTURA BLVD

City State Zip Code
TARZANA CA 91356-3383

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STYLE REALTY & INV.CO.INC. REALTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15390616

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. VOTESANE PAC

Mailing Address PO BOX 2713

City State Zip Code
ALEXANDRIA VA 22301-0713

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39900.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15390627

Amount of Each Receipt this Period
14250.00

CONDUIT

[MEMO ITEM]
EARMARKED CONTRIBUTIONS FROM CONDUIT

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. JOHN BROCKER

Mailing Address **BOX 513-202 E MILLER RD**

City **IOLA** State **KS** Zip Code **66749-4005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALLEN COUNTY REALTY INC** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390639

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. THOMAS CARNAHAN

Mailing Address **22020 VENTURA BLVD**

City **WOODLAND HILLS** State **CA** Zip Code **91364-1645**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390649

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. CINDY CHANDLER

Mailing Address **6325 GAYWIND DRIVE**

City **CHARLOTTE** State **NC** Zip Code **28226-6896**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390628

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 637
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ALLAN DECHERT
Full Name (Last, First, Middle Initial)

Mailing Address 56 W. 16TH ST.
AVALON NJ 08202

City AVALON State NJ Zip Code 08202-2339

FEC ID number of contributing federal political committee. **C**

Name of Employer FERGUSON DECHERT INC Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390651

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

B. MR. GREG GALLI
Full Name (Last, First, Middle Initial)

Mailing Address 36506 CHINA PL.

City PALMDALE State CA Zip Code 93551-7924

FEC ID number of contributing federal political committee. **C**

Name of Employer SUBURBAN REALTY Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390633

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

C. DEBRA GISRIEL
Full Name (Last, First, Middle Initial)

Mailing Address 6471 COOPERS HAWK RD

City KLAMATH FALLS State OR Zip Code 97601-8676

FEC ID number of contributing federal political committee. **C**

Name of Employer FISHER NICHOLSON REALTORS Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390634

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 637
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. KENNETH R. GRAGSON
Full Name (Last, First, Middle Initial)

Mailing Address 9312 TOURNAMENT CANYON DRIVE

City	State	Zip Code
LAS VEGAS	NV	89144-0817

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LEVY REALTY	REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390645

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

B. WILLIAM HANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 281 HAVEN WAY

City	State	Zip Code
SOMERSET	NJ	08873-6440

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PROMINENT PROPERTIES SOTHEBY'S INTERNA	REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390652

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

C. HENRY KAMMANDEL
Full Name (Last, First, Middle Initial)

Mailing Address 1520 S 83RD ST

City	State	Zip Code
OMAHA	NE	68124-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CBSHOME REAL ESTATE CALIFORNIA	REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390642

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JO KENNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1493 FAMA DRIVE
 City ATLANTA State GA Zip Code 30329-3307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KELLER WILLIAMS REALTY METRO A Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390656
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

B. LINDA LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3965 5TH AVENUE UNIT 300
 City SAN DIEGO State CA Zip Code 92103-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KELLER WILLIAMS SD METRO Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390641
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

C. JAMES J. LIPTAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4645 JACK CREEK RD
 City TEMPLETON State CA Zip Code 93465-9400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PATTERSON REALTY Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390636
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION
 EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... **1500.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 OF 637
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	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. REINALDO MESA
Full Name (Last, First, Middle Initial)

Mailing Address 3632 CHURCHILL DOWNS DR

City DAVIE	State FL	Zip Code 33328-1307
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PRUDENTIAL FLORIDA REALTY	Occupation REALTOR
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390647

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

B. MARK MOODY
Full Name (Last, First, Middle Initial)

Mailing Address 5525 HUNTER LANE

City TANNER	State AL	Zip Code 35671-4013
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MARMAC REAL ESTATE	Occupation REALTOR
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390629

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

C. DEANA OLIVER
Full Name (Last, First, Middle Initial)

Mailing Address 205 BLESSING LN.

City KIMBERLING CITY	State MO	Zip Code 65686-9476
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer TRI LAKES INC	Occupation REALTOR
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390646

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DAVID PHILLIPS

Mailing Address **6422 FARMCREST LANE**

City **HARRISBURG** State **PA** Zip Code **17111-4783**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PENNSYLVANIA ASSOC. OF REALTOR** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390657

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. NANCY RILEY

Mailing Address **2967 TEAL LANE**

City **CLEARWATER** State **FL** Zip Code **33762-3066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SMITH & ASSOCIATES REAL ESTATE** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390632

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. NANCY ROGERS

Mailing Address **169 ACER HILL DR**

City **GRAVOIS MILLS** State **MO** Zip Code **65037-7827**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REALTY EXECUTIVES LAKE OF THE** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390644

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ **1500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 382 OF 637
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ERIC SAIN
Full Name (Last, First, Middle Initial)
Mailing Address 316 NORTH BROMELIAD
City WEST PALM BEACH State FL Zip Code 33401-7740
FEC ID number of contributing federal political committee. **C**
Name of Employer CORCORAN GROUP REAL ESTATE Occupation REALTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 20 / 2014**
Transaction ID : SA11.15390631
Amount of Each Receipt this Period **500.00**
CONTRIBUTION
EARMARK: VOTESANE PAC

B. EVA SANDERS
Full Name (Last, First, Middle Initial)
Mailing Address 332 4TH AVENUE
City LAKE OSWEGO State OR Zip Code 97034-3028
FEC ID number of contributing federal political committee. **C**
Name of Employer MEADOWS GROUP, INC., REALTORS Occupation REAL ESTATE BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 20 / 2014**
Transaction ID : SA11.15390650
Amount of Each Receipt this Period **500.00**
CONTRIBUTION
EARMARK: VOTESANE PAC

C. ROBIN SCHWARTZ
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2200
City HIGH SPRINGS State FL Zip Code 32655-2200
FEC ID number of contributing federal political committee. **C**
Name of Employer RE/MAX PROFESSIONALS Occupation BROKER-ASSOCIATE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 20 / 2014**
Transaction ID : SA11.15390654
Amount of Each Receipt this Period **500.00**
CONTRIBUTION
EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... **1500.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 637
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ANGELA SICOLI
Full Name (Last, First, Middle Initial)

Mailing Address 20 GLENROY ROAD SOUTH

City FAIRFIELD	State NJ	Zip Code 07004-1516
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTURY 21 AWARD AGENCY	Occupation BROKER/REALTOR
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390635

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

B. THOMAS SKIFFINGTON
Full Name (Last, First, Middle Initial)

Mailing Address 942 BLOOMING GLEN RD

City PERKASIE	State PA	Zip Code 18944-2965
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RE/MAX 440 PERKASIE	Occupation REALTOR
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390653

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

C. MS. BONNIE SMITH
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7097

City BRECKENRIDGE	State CO	Zip Code 80424-7097
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EXCLUSIVE MTN RETREATS R.E.	Occupation REALTOR
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15390630

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 637
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	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. JACK TORZA
Full Name (Last, First, Middle Initial)

Mailing Address 7293 PEANUT LN

City MECHANICSVILLE State VA Zip Code 23116-4806

FEC ID number of contributing federal political committee. **C**

Name of Employer LONG & FOSTER REALTORS Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390655

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

B. IRMA VARGAS
Full Name (Last, First, Middle Initial)

Mailing Address 2319 PIER

City SANTA MONICA State CA Zip Code 90405-6051

FEC ID number of contributing federal political committee. **C**

Name of Employer TIERRA PROPERTIES Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390643

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

C. KAY WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 6025 S. QUEBEC ST. NO. 100

City CENTENNIAL State CO Zip Code 80111-4549

FEC ID number of contributing federal political committee. **C**

Name of Employer MB-K.WATSON PROP. Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15390640

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. TAMARA WHITE

Mailing Address **5846 N. DALSPRING AVE**

City **BOISE** State **ID** Zip Code **83713-1317**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ATOVA** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390638

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. MARK WOODROOF

Mailing Address **1260 HEATHWOOD DR**

City **HOUSTON** State **TX** Zip Code **77077-2618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRUDENTIAL GARY GREENE** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390648

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. GARY WRIGHT

Mailing Address **5533 PARKSIDE DRIVE**

City **MARYSVILLE** State **WA** Zip Code **98270-4138**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COLDWELL BANKER** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 20 / 2014
Transaction ID : SA11.15390637

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ **1500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 OF 637
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	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. VOTESANE PAC

Mailing Address **PO BOX 2713**

City **ALEXANDRIA** State **VA** Zip Code **22301-0713**

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **39900.00**

Date of Receipt
02 / 27 / 2014
Transaction ID : SA11.15390658

Amount of Each Receipt this Period
2375.00

CONDUIT

[MEMO ITEM]
EARMARKED CONTRIBUTIONS FROM CONDUIT

Full Name (Last, First, Middle Initial)
B. NIKKI BOYD

Mailing Address **878 MORNING SUN DR.**

City **TWIN FALLS** State **ID** Zip Code **83301-8964**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWIN FALLS REAL ESTATE CO
REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 27 / 2014
Transaction ID : SA11.15390660

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. ALLEN CHIANG

Mailing Address **3020 LIMEWOOD**

City **FULLERTON** State **CA** Zip Code **92835-4316**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRESIDENTIAL INC
REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
02 / 27 / 2014
Transaction ID : SA11.15390662

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ **1000.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. STUART ELSEA

Mailing Address 7647 DEVINS RIDGE

City State Zip Code
CLARKSTON MI 48348-4355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REAL ESTATE ONE REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15390663

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
B. TRAVIS KESSLER

Mailing Address 8747 CHALK KNOLL DR.

City State Zip Code
AUSTIN TX 78735-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TEXAS ASSOCIATION OF REALTORS REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15390661

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

Full Name (Last, First, Middle Initial)
C. GREG WRIGHT

Mailing Address 1059 STATE AVE.

City State Zip Code
MARYSVILLE WA 98270-4269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NICK MCLEAN REAL ESTATE GROUP REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11.15390659

Amount of Each Receipt this Period
500.00

CONTRIBUTION

EARMARK: VOTESANE PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶ 1689506.00

**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 388 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BILIRAKIS FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 606

City TARPON SPRINGS	State FL	Zip Code 34688-0606
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00408534

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
45000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2014

Transaction ID : SA11.15385520

Amount of Each Receipt this Period

20000.00

TRANSFER

B. BISHOP FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2006

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00374231

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359897

Amount of Each Receipt this Period

5000.00

TRANSFER

C. BISHOP FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2006

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00374231

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

Transaction ID : SA11.15373604

Amount of Each Receipt this Period

10000.00

TRANSFER

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: (check only one)	PAGE 389 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DEVIN NUNES CAMPAIGN COMMITTEE

Mailing Address P.O. BOX 6545

City VISALIA State CA Zip Code 93290-6545

FEC ID number of contributing federal political committee. **C** C00370056

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376801

Amount of Each Receipt this Period
 12000.00

TRANSFER

Full Name (Last, First, Middle Initial)
B. FRIENDS OF SAM JOHNSON

Mailing Address P.O. BOX 860096

City PLANO State TX Zip Code 75086-0096

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359898

Amount of Each Receipt this Period
 12000.00

TRANSFER

Full Name (Last, First, Middle Initial)
C. IOWANS FOR LATHAM

Mailing Address PO BOX 8237

City DES MOINES State IA Zip Code 50301-8237

FEC ID number of contributing federal political committee. **C** C00287045

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
97500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385548

Amount of Each Receipt this Period
 97500.00

TRANSFER

SUBTOTAL of Receipts This Page (optional).....▶	121500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 390 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. LATTA FOR CONGRESS		Date of Receipt
Mailing Address 300 N. MAIN STREET		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City State Zip Code BOWLING GREEN OH 43402-2423		Transaction ID : SA11.15376802
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00438697"/>		Amount of Each Receipt this Period <input type="text" value="16000.00"/>
Name of Employer	Occupation	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="16000.00"/>	

Full Name (Last, First, Middle Initial) B. ROGERS FOR CONGRESS		Date of Receipt
Mailing Address P.O. BOX 581		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code BRIGHTON MI 48116-0581		Transaction ID : SA11.15385519
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00343863"/>		Amount of Each Receipt this Period <input type="text" value="44000.00"/>
Name of Employer	Occupation	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="44000.00"/>	

Full Name (Last, First, Middle Initial) C. WEBER FOR CONGRESS		Date of Receipt
Mailing Address PO BOX 1327		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code FRIENDSWOOD TX 77549-1327		Transaction ID : SA11.15359899
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00502229"/>		Amount of Each Receipt this Period <input type="text" value="12000.00"/>
Name of Employer	Occupation	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="12000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="72000.00"/>
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: (check only one)	PAGE 391 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241-0391

FEC ID number of contributing federal political committee. **C** C00289983

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70000.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11.15373603

Amount of Each Receipt this Period
70000.00

TRANSFER

Full Name (Last, First, Middle Initial)
B. ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address 1399 NEW YORK AVENUE NW SUITE 200

City WASHINGTON State DC Zip Code 20005-4732

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15359916

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AFLAC INCORPORATED PAC

Mailing Address 1300 PENNSLYVANIA AVENUE, NW SUITE 300

City WASHINGTON State DC Zip Code 20004-3039

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
02 / 10 / 2014
Transaction ID : SA11.15359911

Amount of Each Receipt this Period
15000.00

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 392 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. AIR LINE PILOTS ASSOCIATION, INTERNATIONAL PAC

Mailing Address 1625 MASSACHUSETTS AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359908

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ALZHEIMERS IMPACT MOVEMENT PAC

Mailing Address 225 NORTH MICHIGAN AVENUE
SUITE 1700

City	State	Zip Code
CHICAGO	IL	60601-7652

FEC ID number of contributing federal political committee. **C** C00486928

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385544

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICA'S HEALTH INSURANCE PLANS PAC

Mailing Address 601 PENNSYLVANIA AVE. NW, SOUTH BU

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385542

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	37500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 393 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS PAC

Mailing Address 205 N MICHIGAN AVE STE 2400

City State Zip Code
CHICAGO IL 60601-5923

FEC ID number of contributing federal political committee. **C C00273003**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15385532

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERICAN COUNCIL OF LIFE INSURERS PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 700

City State Zip Code
WASHINGTON DC 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359914

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICAN FINANCIAL SERVICES ASSOCIATION PAC- AFSA

Mailing Address 919 18TH STREET, NW

City State Zip Code
WASHINGTON DC 20006-5519

FEC ID number of contributing federal political committee. **C C00038604**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359910

Amount of Each Receipt this Period
15000.00

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 394 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. AMERICAN HOTEL & LODGING ASSOCIATION PAC

Mailing Address 1201 NEW YORK AVENUE, NW #600

City	State	Zip Code
WASHINGTON	DC	20005-3917

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385540

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Mailing Address 1455 PENNSYLVANIA AVE. NW-SUITE 40

City	State	Zip Code
WASHINGTON	DC	20004-1017

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2014

Transaction ID : SA11.15376790

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICAN LIBERTY AND NATION PAC (ALAN PAC)

Mailing Address PO BOX 7092

City	State	Zip Code
TUPELO	MS	38802-7092

FEC ID number of contributing federal political committee. **C** C00495150

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

Transaction ID : SA11.15373608

Amount of Each Receipt this Period
13000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	43000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 395 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. AMERICAN MARITIME OFFICERS VOLUNTARY PAC

Mailing Address 2 W DIXIE HIGHWAY

City DANIA State FL Zip Code 33004-4312

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385515

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERICAN MEDICAL ASSOCIATION PAC

Mailing Address 25 MASSACHUSETTS AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15388829

Amount of Each Receipt this Period
 15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICAN NURSES ASSOCIATION PAC

Mailing Address 8515 GEORGIA AVENUE
SUITE 400

City SILVER SPRING State MD Zip Code 20910-3492

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385531

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 396 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. ARCHER DANIELS MIDLAND COMPANY PAC

Mailing Address 1212 NEW YORK AVE NW

City	State	Zip Code
WASHINGTON	DC	20005-3987

FEC ID number of contributing federal political committee. **C** C00093963

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385536

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ASHLAND PAC FOR EMPLOYEES

Mailing Address P.O. BOX 391

City	State	Zip Code
ASHLAND	KY	41105-0391

FEC ID number of contributing federal political committee. **C** C00075994

Name of Employer	Occupation

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
02	/	10	/	2014

Transaction ID : SA11.15359909

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ASIAN AMERICAN HOTEL OWNER ASSOCIATION PAC

Mailing Address 228 S. WASHINGTON STREET SUITE 115

City	State	Zip Code
ALEXANDRIA	VA	22314-5404

FEC ID number of contributing federal political committee. **C** C00336743

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385543

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	32500.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 397 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ASSOCIATION OF PRIVATE SECTOR COLLEGES AND UNIVERSITIES (APS)
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 G STREET NE
 SUITE 750
 City WASHINGTON State DC Zip Code 20002-4258
 FEC ID number of contributing federal political committee. **C** C00213066
 Name of Employer Occupation
 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
 02 / 20 / 2014
Transaction ID : SA11.15376782
 Amount of Each Receipt this Period
 10000.00
 CONTRIBUTION

B. BANK OF AMERICA CORPORATION STATE AND FEDERAL PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1455 PENNSYLVANIA AVE. NW
 SUITE 950
 City WASHINGTON State DC Zip Code 20004-1043
 FEC ID number of contributing federal political committee. **C** C00043489
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376783
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

C. BLUEPAC- BLUE CROSS & BLUE SHIELD ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 G. STREET NW
 12 FLOOR
 City WASHINGTON State DC Zip Code 20005-3001
 FEC ID number of contributing federal political committee. **C** C00194746
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11.15379680
 Amount of Each Receipt this Period
 5000.00
 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 398 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. BUILD PAC - NATIONAL ASSOCIATION OF HOME BUILDERS PAC

Mailing Address 1201 15TH ST NW

City	State	Zip Code
WASHINGTON	DC	20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385546

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BURLINGTON NORTHERN SANTA FE RAILPAC (BNSF)

Mailing Address 1001 G STREET NW

City	State	Zip Code
WASHINGTON	DC	20001-4545

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA11.15385534

Amount of Each Receipt this Period
12500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. BUS PAC (AMERICAN BUS ASSOCIATION)

Mailing Address 111 K STREET NE FLOOR 9

City	State	Zip Code
WASHINGTON	DC	20002-8110

FEC ID number of contributing federal political committee. **C** C00004879

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

Transaction ID : SA11.15379675

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	32500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 399 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CASH AMERICA INTERNATIONAL, INC. PAC

Mailing Address 1600 W. 7TH STREET

City State Zip Code
FORT WORTH TX 76102-2504

FEC ID number of contributing federal political committee. **C C00275529**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376779

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CELANESE CORPORATION PAC

Mailing Address 222 W. LAS COLINAS BLVD. ST. 900

City State Zip Code
IRVING TX 75039

FEC ID number of contributing federal political committee. **C C00084871**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014
Transaction ID : SA11.15373607

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CHARTER COMMUNICATIONS, INC. PAC

Mailing Address 1919 PENNSYLVANIA AVENUE, NW
SUITE 200

City State Zip Code
WASHINGTON DC 20006-3402

FEC ID number of contributing federal political committee. **C C00426775**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15388833

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 400 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CHESAPEAKE ENERGY CORPORATION FED. PAC

Mailing Address 2470 DANIELLS BRIDGE ROAD
SUITE 121

City Athens State GA Zip Code 30606-6191

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376789

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CINTAS CORPORATION PARTNERS PAC

Mailing Address 6800 CINTAS BOULEVARD

City MASON State OH Zip Code 45040-9151

FEC ID number of contributing federal political committee. **C** C00449165

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376798

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CITIGROUP INC. PAC- FEDERAL

Mailing Address 1101 PENNSYLVANIA NW SUITE 1000

City WASHINGTON State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359917

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	32500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 401 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. COALPAC, NATIONAL MINING ASSOCIATION PAC

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 500 EAST

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11.15385510

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address ONE COCA-COLA PLAZA

City ATLANTA State GA Zip Code 30313-2420

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376785

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. COMPASS BANCSHARES, INC. PAC (BBVA COMPASS)

Mailing Address 1701 PENNSYLVANIA AVE, NW SUITE 10

City WASHINGTON State DC Zip Code 20006-5805

FEC ID number of contributing federal political committee. **C** C00142596

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376796

Amount of Each Receipt this Period
15000.00

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 402 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CONSUMER ELECTRONICS ASSOCIATION PAC

Mailing Address 1919 SOUTH EADS STREET

City ARLINGTON State VA Zip Code 22202-3028

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359907

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET, NW
SUITE 300

City WASHINGTON State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376786

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DAVITA PAC

Mailing Address 1155 15TH STREET NW, SUITE 1100

City WASHINGTON State DC Zip Code 20005-2714

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014
Transaction ID : SA11.15379677

Amount of Each Receipt this Period
15000.00

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 403 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DELOITTE FEDERAL PAC
Full Name (Last, First, Middle Initial)
Mailing Address 555 12TH STREET, NW
SUITE 500
City WASHINGTON State DC Zip Code 20004-1231
FEC ID number of contributing federal political committee. **C** C00211318
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376787
Amount of Each Receipt this Period
15000.00
CONTRIBUTION

B. DENT PAC
Full Name (Last, First, Middle Initial)
Mailing Address 610 S. BOULEVARD
City TAMPA State FL Zip Code 33606-2693
FEC ID number of contributing federal political committee. **C** C00427930
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15385539
Amount of Each Receipt this Period
15000.00
CONTRIBUTION

C. DEPOSITORY TRUST & CLEARING CORPORATION PAC
Full Name (Last, First, Middle Initial)
Mailing Address 601 13TH STREET NW
City WASHINGTON State DC Zip Code 20005-3807
FEC ID number of contributing federal political committee. **C** C00497917
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11.15385512
Amount of Each Receipt this Period
5000.00
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: (check only one)	PAGE 404 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. DEPOSITORY TRUST & CLEARING CORPORATION PAC

Mailing Address 601 13TH STREET NW

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2014
Transaction ID : SA11.15385513

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DEPOSITORY TRUST & CLEARING CORPORATION PAC

Mailing Address 601 13TH STREET NW

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : SA11.15385547

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DEVRY PAC

Mailing Address ONE TOWER LANE 10TH FLOOR

City OAKBROOK TERRACE State IL Zip Code 60181-4671

FEC ID number of contributing federal political committee. **C** C00198606

Name of Employer Occupation

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
02 / 10 / 2014
Transaction ID : SA11.15359915

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	12500.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 405 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. DLA PIPER U.S. LLP PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 8TH STREET NW
 SUITE 700
 City WASHINGTON State DC Zip Code 20004-2131
 FEC ID number of contributing federal political committee. **C** C00151340
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11.15385507
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

B. DOMINION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 N. CAPITOL STREET NW
 SUITE 729
 City WASHINGTON State DC Zip Code 20001-1580
 FEC ID number of contributing federal political committee. **C** C00108209
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376795
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

C. DRS TECHNOLOGIES INC. GOOD GOVERNMENT FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 1755 S. JEFFERSON DAVIS HIGHWAY
 SUITE 110
 City ARLINGTON State VA Zip Code 22202-3529
 FEC ID number of contributing federal political committee. **C** C00275123
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11.15373606
 Amount of Each Receipt this Period
 5000.00
 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: (check only one)	PAGE 406 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. DUKE ENERGY CORPORATION PAC		Date of Receipt
Mailing Address 325 7TH STREET, NW SUITE 300		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11.15385516
WASHINGTON	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00083535"/>	<input type="text" value="15000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) B. DYNCORP INTERNATIONAL LLC PAC		Date of Receipt
Mailing Address 3190 FAIRVIEW PARK DR SUITE 700		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11.15379681
FALLS CHURCH	VA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00409979"/>	<input type="text" value="2500.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. EASTMANPAC - PAC OF EASTMAN CHEMICAL		Date of Receipt
Mailing Address 1300 WILSON BLVD. SUITE 900		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11.15359900
ARLINGTON	VA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00113159"/>	<input type="text" value="15000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="32500.00"/>
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: (check only one)	PAGE 407 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ELECTRICAL CONTRACTORS PAC		Date of Receipt
Mailing Address 3 BETHESDA METRO CENTER SUITE 1100		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
BETHESDA	MD	20814-6302
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00113811"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11.15385537
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) B. ELI LILLY & COMPANY PAC		Date of Receipt
Mailing Address 555 TWELFTH STREET, NW SUITE 650		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20004-1209
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00082792"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	
		Transaction ID : SA11.15385506
		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) C. EXELIS INC. EMPLOYEES PAC		Date of Receipt
Mailing Address 1650 TYSONS BOULEVARD		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
MCLEAN	VA	22102-4856
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00141002"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	
		Transaction ID : SA11.15385511
		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
		CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30000.00"/>
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: (check only one)	PAGE 408 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. EXPRESS SCRIPTS, INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE EXPRESS WAY
 City SAINT LOUIS State MO Zip Code 63121-1824
 FEC ID number of contributing federal political committee. **C** C00365072
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.1538831
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. FLAGSTAR BANK FEDERAL PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 5151 CORPORATE DRIVE
 City TROY State MI Zip Code 48098-2639
 FEC ID number of contributing federal political committee. **C** C00455733
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.1537692
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. FLOWER FOODS INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 FLOWERS CIRCLE
 City THOMASVILLE State GA Zip Code 31757-1137
 FEC ID number of contributing federal political committee. **C** C00033555
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.1535903
 Amount of Each Receipt this Period
 15000.00
 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 409 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address 1350 I. STREET NW
SUITE 1000

City WASHINGTON State DC Zip Code 20005-7205

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359906

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. GENERAL DYNAMICS CORPORATION PAC

Mailing Address 3190 FAIRVIEW PARK DRIVE

City FALLS CHURCH State VA Zip Code 22042-4530

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11.15388830

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. GENERAL ELECTRIC PAC

Mailing Address 1299 PENNSYLVANIA AVENUE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376799

Amount of Each Receipt this Period
15000.00

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 410 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. GRANT THORNTON LLP PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1250 CONNECTICUT AVE, NW
 SUITE 400
 City WASHINGTON State DC Zip Code 20036-2660
 FEC ID number of contributing federal political committee. **C** C00408260
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376781
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. GROUP 1 AUTOMOTIVE INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 GESSNER ROAD
 SUITE 500
 City HOUSTON State TX Zip Code 77024-4498
 FEC ID number of contributing federal political committee. **C** C00373837
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376780
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

C. HDR INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 8404 INDIAN HILLS DRIVE
 City OMAHA State NE Zip Code 68114-4049
 FEC ID number of contributing federal political committee. **C** C00103903
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376797
 Amount of Each Receipt this Period
 15000.00
 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: (check only one)	PAGE 411 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HOME DEPOT, INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1155 F STREET, NW
SUITE 400
City WASHINGTON State DC Zip Code 20004-1346
FEC ID number of contributing federal political committee. **C** C00284885
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2014
Transaction ID : SA11.15385509
Amount of Each Receipt this Period
15000.00
CONTRIBUTION

B. INVESTMENT COMPANY INSTITUTE PAC ICI
Full Name (Last, First, Middle Initial)
Mailing Address 1401 H STREET NW
12TH FL. SUITE 1200
City WASHINGTON State DC Zip Code 20005-2110
FEC ID number of contributing federal political committee. **C** C00105981
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2014
Transaction ID : SA11.15379679
Amount of Each Receipt this Period
15000.00
CONTRIBUTION

C. KOCH INDUSTRIES PAC
Full Name (Last, First, Middle Initial)
Mailing Address 655 15TH STREET N.W.
SUITE 445
City WASHINGTON State DC Zip Code 20005-5727
FEC ID number of contributing federal political committee. **C** C00236489
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014
Transaction ID : SA11.15376784
Amount of Each Receipt this Period
15000.00
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 412 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. LEADERSHIP FOR AMERICA TODAY TOMORROW AND ALWAYS PAC		Date of Receipt
Mailing Address 9856 ARCHER LANE		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City State Zip Code DUBLIN OH 43017-8914		Transaction ID : SA11.15376794
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00485540"/>		Amount of Each Receipt this Period <input type="text" value="12500.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="12500.00"/>	

Full Name (Last, First, Middle Initial) B. LIBERTY INTERACTIVE CORPORATION PAC		Date of Receipt
Mailing Address 12300 LIBERTY BOULEVARD		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code ENGLEWOOD CO 80112-7009		Transaction ID : SA11.15385545
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00442434"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. LIBERTY MEDIA CORPORATION PAC		Date of Receipt
Mailing Address 12300 LIBERTY BLVD.		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code ENGLEWOOD CO 80112-7009		Transaction ID : SA11.15385538
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00442434"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="22500.00"/>
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: (check only one)	PAGE 413 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. LOCKRIDGE, GRINDAL, NAUEN PAC		Date of Receipt
Mailing Address 100 WASHINGTON AVENUE SOUTH SUITE 2200		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
MINNEAPOLIS	MN	55401-2159
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00167916"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11.15373609
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) B. LYONDELL CHEMICAL COMPANY PAC		Date of Receipt
Mailing Address 300 NEW JERSEY AVENUE, NW SUITE 300		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20001-2030
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00306175"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11.15359901
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) C. MCDONALD'S CORPORATION PAC		Date of Receipt
Mailing Address 1099 NEW YORK AVE NW STE 510		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20001-4493
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00063164"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	
		Transaction ID : SA11.15379674
		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
		CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="25000.00"/>
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: (check only one)	PAGE 414 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MERCK PAC		Date of Receipt MM / DD / YYYY 02 / 20 / 2014 Transaction ID : SA11.15376776
Mailing Address 601 PENNSYLVANIA AVENUE NW NORTH BUILDING SUITE 1200		Amount of Each Receipt this Period 15000.00
City WASHINGTON State DC Zip Code 20004-2601	FEC ID number of contributing federal political committee. C C00097485	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MIKE R FUND		Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11.15385518
Mailing Address P.O. BOX 2485		Amount of Each Receipt this Period 10000.00
City SPRINGFIELD State VA Zip Code 22152-0485	FEC ID number of contributing federal political committee. C C00370791	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 10000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MINEPAC, NATIONAL MINING ASSOCIATION		Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11.15385514
Mailing Address 101 CONSTITUTION AVENUE, NW SUITE 500 EAST		Amount of Each Receipt this Period 5000.00
City WASHINGTON State DC Zip Code 20001-2133	FEC ID number of contributing federal political committee. C C00304634	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 415 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. NATIONAL ASSOCIATION OF CHAIN DRUG STORES PAC

Mailing Address 1776 WILSON BLVD., SUITE 200

City	State	Zip Code
ARLINGTON	VA	22209-2516

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359902

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSN PAC

Mailing Address 606 N. WASHINGTON STREET

City	State	Zip Code
ALEXANDRIA	VA	22314-1914

FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA11.15359905

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS PAC

Mailing Address 3138 10TH STREET NORTH

City	State	Zip Code
ARLINGTON	VA	22201-2160

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer	Occupation

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
02	/	20	/	2014

Transaction ID : SA11.15376800

Amount of Each Receipt this Period
2500.00

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 416 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. NATIONAL EMERGENCY MEDICINE PAC		Date of Receipt
Mailing Address PO BOX 619911		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
DALLAS	TX	75261-9911
FEC ID number of contributing federal political committee.	<input type="text" value="C00140061"/>	Transaction ID : SA11.15359912
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="15000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) B. NATIONAL RURAL LETTER CARRIERS' ASSOCIATION PAC		Date of Receipt
Mailing Address 1630 DUKE STREEET, 4TH FLOOR		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
ALEXANDRIA	VA	22314-3426
FEC ID number of contributing federal political committee.	<input type="text" value="C00072025"/>	Transaction ID : SA11.15379682
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="15000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) C. NATSO INC. NATSO PAC		Date of Receipt
Mailing Address 1737 KING STREET SUITE 200		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
ALEXANDRIA	VA	22314-2727
FEC ID number of contributing federal political committee.	<input type="text" value="C00097865"/>	Transaction ID : SA11.15385535
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35000.00"/>
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: (check only one)	PAGE 417 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. NEA FUND FOR CHILDREN AND PUBLIC EDUCATION
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 16TH ST NW
 City WASHINGTON State DC Zip Code 20036-3201
 FEC ID number of contributing federal political committee. **C** C00003251
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 02 / 20 / 2014
Transaction ID : SA11.15376777
 Amount of Each Receipt this Period 15000.00
 CONTRIBUTION

B. NFIB SAFE TRUST PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 F STREET NW, SUITE 200
 City WASHINGTON State DC Zip Code 20004-1221
 FEC ID number of contributing federal political committee. **C** C00101105
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.15385541
 Amount of Each Receipt this Period 15000.00
 CONTRIBUTION

C. NUCOR CORPORATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1915 REXFORD ROAD
 City CHARLOTTE State NC Zip Code 28211-3465
 FEC ID number of contributing federal political committee. **C** C00379628
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11000.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11.15379678
 Amount of Each Receipt this Period 11000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	41000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 418 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. ORACLE CORPORATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 15TH STREET NW
 SUITE 200
 City WASHINGTON State DC Zip Code 20005-2635
 FEC ID number of contributing federal political committee. **C** C00323048
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.15385533
 Amount of Each Receipt this Period
 3750.00
 CONTRIBUTION

B. PPL CORPORATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 7TH STREET, NW, SUITE 510
 City WASHINGTON State DC Zip Code 20001-3888
 FEC ID number of contributing federal political committee. **C** C00228106
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376788
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

C. PROMOTING OUR REPUBLICAN TEAM PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 8331 LITTLE HARBOR DRIVE
 City CINCINNATI State OH Zip Code 45244-2768
 FEC ID number of contributing federal political committee. **C** C00440032
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.15359918
 Amount of Each Receipt this Period
 15000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	33750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 419 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC

Mailing Address 444 N. CAPITOL STREET NW
SUITE 801

City WASHINGTON State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014
Transaction ID : SA11.15379676

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PROSPERITY PAC

Mailing Address 1006 PENDLETON AVENUE

City ALEXANDRIA State VA Zip Code 22314-1837

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11.15359904

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. SPECIALTY EQUIPMENT MARKET ASSOCIATION

Mailing Address 1575 SOUTH VALLEY VISTA DR.

City DIAMOND BAR State CA Zip Code 91765-3914

FEC ID number of contributing federal political committee. **C** C00389403

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11.15376791

Amount of Each Receipt this Period
5000.00

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 420 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. TEXTRON INC. PAC		Date of Receipt
Mailing Address 1101 PENNSYLVANIA AVENUE NW SUITE 400		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20004-2514
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00123612"/>	Transaction ID : SA11.15385530
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="15000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) B. THOROUGHbred PAC		Date of Receipt
Mailing Address PO BOX 65116		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20035-5116
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00425439"/>	Transaction ID : SA11.15376793
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="15000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) C. UNITEDHEALTH GROUP INC. PAC		Date of Receipt
Mailing Address 701 PENNSYLVANIA AVE., NW SUITE 530		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20004-2608
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00274431"/>	Transaction ID : SA11.15385517
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35000.00"/>
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: (check only one)	PAGE 421 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. VALERO ENERGY CORPORATION PAC
Full Name (Last, First, Middle Initial)

Mailing Address 601 PENN AVE NW, SOUTH BUILDING, S

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11.1538832

Amount of Each Receipt this Period
 15000.00

CONTRIBUTION

B. VERIZON COMMUNICATIONS GOOD GOVERNMENT CLUB
Full Name (Last, First, Middle Initial)

Mailing Address 1300 I. STREET NW
SUITE 400 WEST

City WASHINGTON State DC Zip Code 20005-3306

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11.1535913

Amount of Each Receipt this Period
 15000.00

CONTRIBUTION

C. WELLCARE HEALTH PLANS INC. PAC
Full Name (Last, First, Middle Initial)

Mailing Address 8735 HENDERSON RD STE 270

City TAMPA State FL Zip Code 33634

FEC ID number of contributing federal political committee. **C** C00390575

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11.15376778

Amount of Each Receipt this Period
 15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 45000.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 422 OF 637
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. WINE AND SPIRITS WHOLESALERS OF AMERICA PAC
Full Name (Last, First, Middle Initial)
Mailing Address 805 15TH STREET, NW
City WASHINGTON State DC Zip Code 20005-2207
FEC ID number of contributing federal political committee. **C** C00147173
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2014
Transaction ID : SA11.15385508
Amount of Each Receipt this Period
15000.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	1318750.00

**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 423 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. BEEHIVE VICTORY FUND, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 WESTFIELD CIRCLE
 City ALPINE State UT Zip Code 84004-1594
 FEC ID number of contributing federal political committee. **C** C00520999
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2231.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA12.15388804
 Amount of Each Receipt this Period
 2231.78
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. MR. DAVID LISONBEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9850 S. 300 W.
 City SANDY State UT Zip Code 84070-3262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 4LIFE RESEARCH C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014
Transaction ID : SA12.15388828
 Amount of Each Receipt this Period
 2400.00
 JFC ATTRIB: BEEHIVE VICTORY FUND LLC
[MEMO ITEM]

C. BOEHNER FOR SPEAKER COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 1ST STREET SE
 City WASHINGTON State DC Zip Code 20003-1838
 FEC ID number of contributing federal political committee. **C** C00478354
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 877511.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA12.15388840
 Amount of Each Receipt this Period
 613487.68
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....	615719.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 424 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. SAMUEL D. ADCOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 KINGSLEY ROAD SE
 City VIENNA State VA Zip Code 22180-6502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AIRBUS HELICOPTERS Occupation VP, GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2300.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA12.15393170
 Amount of Each Receipt this Period **2300.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. EDWARD C. ALLRED
 Full Name (Last, First, Middle Initial)
 Mailing Address 11786 ALNESS LN
 City LAS VEGAS State NV Zip Code 89141-6001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOS ALAMITOS RACE COURSE Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **19800.00**

Date of Receipt **02 / 07 / 2014**
Transaction ID : SA12.15393188
 Amount of Each Receipt this Period **19800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. R. M. BEALL II
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City SARASOTA State FL Zip Code 34238-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA12.15393161
 Amount of Each Receipt this Period **4800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 425 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BERNARD F. BUTLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 SUNNY SLOPE LANE
 City State Zip Code
 MANHATTAN KS 66502-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED PIZZA HUT FRANCHISE
 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
 02 / 07 / 2014
Transaction ID : SA12.15393182
 Amount of Each Receipt this Period
 20000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MRS. JORIE BUTLER KENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 349 CHILEAN AVENUE
 City State Zip Code
 PALM BEACH FL 33480-4631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ABERCROMBIE AND KENT VICE CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 7300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA12.15393158
 Amount of Each Receipt this Period
 7300.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. A.M. CLISE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 7TH AVENUE
 SUITE 1800
 City State Zip Code
 SEATTLE WA 98101-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CLISE PROPERTIES PROPERTY MANAGEMENT
 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
 02 / 07 / 2014
Transaction ID : SA12.15393150
 Amount of Each Receipt this Period
 10000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 426 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHNNY D. COPE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 905

City HOBBS	State NM	Zip Code 88241-0905
FEC ID number of contributing federal political committee. C		
Name of Employer HOBBS RENTAL CORPORATION	Occupation OIL & GAS SERVICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014
Transaction ID : SA12.15393152

Amount of Each Receipt this Period
10000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. MR. GARRETT COPELAND JR.
Full Name (Last, First, Middle Initial)
Mailing Address 242 S. WASHINGTON BOULEVARD PMB361

City SARASOTA	State FL	Zip Code 34236-6943
FEC ID number of contributing federal political committee. C		
Name of Employer TERREG MANAGEMENT	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA12.15393162

Amount of Each Receipt this Period
4800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. MR. HOWARD E. COX JR.
Full Name (Last, First, Middle Initial)
Mailing Address 880 WINTER ST.

City WALTHAM	State MA	Zip Code 02451-
FEC ID number of contributing federal political committee. C		
Name of Employer GREYLOCK	Occupation VENTURE CAPITAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014
Transaction ID : SA12.15393183

Amount of Each Receipt this Period
20000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 427 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. JOHN F. DONAHUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 LIBERTY DRIVE
 SUITE 850
 City PITTSBURGH State PA Zip Code 15222-3718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FEDERATED INVESTORS Occupation CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **32400.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA12.15393172
 Amount of Each Receipt this Period **32400.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. ROBERT J. DOTCHIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 412 N SAINT ASAPH ST.
 City ALEXANDRIA State VA Zip Code 22314-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADVOCACY GROUP Occupation PUBLIC AFFAIRS CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA12.15393171
 Amount of Each Receipt this Period **800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. E. LLOYD ECCLESTONE JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 SOUTH OCEAN BLVD.
 City PALM BEACH State FL Zip Code 33480-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PGA NATIONAL RESORT Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **19800.00**

Date of Receipt **02 / 14 / 2014**
Transaction ID : SA12.15393187
 Amount of Each Receipt this Period **19800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 428 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. BILL L. EDWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12550 5TH SRTEET E
 City State Zip Code
 TREASURE ISLAND FL 33706-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BILL EDWARDS PRESENTS, INC. C.E.O.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA12.15393174
 Amount of Each Receipt this Period
 32400.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MRS. JOANNE R. EDWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12550 5TH ST. EAST
 City State Zip Code
 TREASURE ISLAND FL 33706-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA12.15393175
 Amount of Each Receipt this Period
 32400.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. JOSE PEPE F. FANJUL SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N. CLEMATIS STREET
 SUITE 200
 City State Zip Code
 WEST PALM BEACH FL 33401-5551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FLORIDA CRYSTALS CORPORATION EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 19800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA12.15393190
 Amount of Each Receipt this Period
 19800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 429 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. PEPE F. FANJUL JR.

Full Name (Last, First, Middle Initial)
Mailing Address 201 GARDEN ROAD
SUITE 200

City PALM BEACH State FL Zip Code 33480-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer FLORIDA CRYSTALS CORPORATION Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
02 / 14 / 2014
Transaction ID : SA12.15393178

Amount of Each Receipt this Period
25000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. MRS. DEBORAH FINEGAN

Full Name (Last, First, Middle Initial)
Mailing Address 290 ROUND HILL ROAD

City GREENWICH State CT Zip Code 06831-3360

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
02 / 28 / 2014
Transaction ID : SA12.15393179

Amount of Each Receipt this Period
25000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. MR. JAMES L. GAGAN

Full Name (Last, First, Middle Initial)
Mailing Address 8450 BROADWAY

City MERRILLVILLE State IN Zip Code 46410-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer DIRECT BUY Occupation FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19800.00

Date of Receipt
02 / 07 / 2014
Transaction ID : SA12.15393189

Amount of Each Receipt this Period
19800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 430 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. COURTNEY C. GEDULDIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 1423 SPRING VALE AVE
 City MC LEAN State VA Zip Code 22101-3528
 Name of Employer FINANCIAL SERVICES FORUM Occupation MANAGING DIRECTOR, HEAD OF FED. GOV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA12.15393180
 Amount of Each Receipt this Period 25000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. HURBERT T. GREENWAY JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 946 MS112A
 City RANCHO SANTA FE State CA Zip Code 92067-0946
 Name of Employer SCRIPPS Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 07 / 2014
Transaction ID : SA12.15393151
 Amount of Each Receipt this Period 10000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. JOHN E. HAMLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 575 NORTH NOVA RD.
 City ORMOND BEACH State FL Zip Code 32174-4445
 Name of Employer HAMLIN & ASSOCIATES Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA12.15393164
 Amount of Each Receipt this Period 4800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 431 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GLENN W. HASSE JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 SEAGATE DR APT 1503
 City NAPLES State FL Zip Code 34103-2488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation R & J WAY INDUSTRIES OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **02 / 24 / 2014**
Transaction ID : SA12.15393163
 Amount of Each Receipt this Period **4800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. STANLEY M. HERZOG
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 S. RIVERSIDE ROAD P.O. BOX 1089
 City ST. JOSEPH State MO Zip Code 64507-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CHAIRMAN & C.E.O.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **22600.00**

Date of Receipt **02 / 07 / 2014**
Transaction ID : SA12.15393181
 Amount of Each Receipt this Period **22600.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. MURRAY B. HILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 348 METATE PLACE
 City PALM DESERT State CA Zip Code 92260-7343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **02 / 07 / 2014**
Transaction ID : SA12.15393165
 Amount of Each Receipt this Period **4800.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 432 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HON. ALFRED HOFFMAN JR.
Full Name (Last, First, Middle Initial)
Mailing Address 12530 SEMINOLE BEACH RD

City NORTH PALM BEACH	State FL	Zip Code 33408-2534
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WCI COMMUNITIES	Occupation CHIEF EXECUTIVE OFFICER
-------------------------------------	---------------------------------------

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
02	/	14	/	2014

Transaction ID : SA12.15393154

Amount of Each Receipt this Period
10000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. MRS. CHERYL A. HOWARD
Full Name (Last, First, Middle Initial)
Mailing Address 56 LAUREL POINT TOAD

City FRIDAY HARBOR	State WA	Zip Code 98250-6004
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SA12.15393168

Amount of Each Receipt this Period
4800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. MR. MARK W. ISAKOWITZ
Full Name (Last, First, Middle Initial)
Mailing Address 3198 POND MIST WAY

City OAK HILL	State VA	Zip Code 20171-1905
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FIERCE, ISAKOWITZ & BLALOCK	Occupation PRESIDENT
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SA12.15393156

Amount of Each Receipt this Period
7600.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 433 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. DARLENE JORDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA12.15393143
 Amount of Each Receipt this Period
 19800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. AMIN J. KHOURY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 CORPORATE CENTER WAY
 City WELLINGTON State FL Zip Code 33414-2105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 B/E AEROSPACE, INC. CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA12.15393185
 Amount of Each Receipt this Period
 19800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MS. TERRY ALLEN KRAMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 FIFTH AVENUE
 9TH FLOOR
 City NEW YORK State NY Zip Code 10022-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REMARKABLE PARTNERS THEATRICAL PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA12.15393184
 Amount of Each Receipt this Period
 19800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 434 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. HON. EARLE I. MACK
Full Name (Last, First, Middle Initial)

Mailing Address 2115 LINWOOD AVENUE
SUITE 110

City State Zip Code
FORT LEE NJ 07024-5022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE MACK COMPANY BUSINESS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SA12.15393149

Amount of Each Receipt this Period
10000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. MR. HAROLD MATZNER
Full Name (Last, First, Middle Initial)

Mailing Address 555 NORTH PATENCIO
UNITE 10B

City State Zip Code
PALM SPRINGS CA 92262-4353

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CBA INDUSTRIES, INC. CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SA12.15393176

Amount of Each Receipt this Period
25000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. MR. CARLOS G. MORRISON
Full Name (Last, First, Middle Initial)

Mailing Address 336 EL VEDADO RD

City State Zip Code
PALM BEACH FL 33480-4736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PRIVATE INVESTIGATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19800.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SA12.15393186

Amount of Each Receipt this Period
19800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 435 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. GEORGE A. RAMONAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1333 H ST. NW
 STE. 500 W.
 City WASHINGTON State DC Zip Code 20005-4707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE ADVOCACY GROUP Occupation GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **7500.00**

Date of Receipt **02 / 28 / 2014**
Transaction ID : SA12.15393157
 Amount of Each Receipt this Period **7500.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MR. JOHN G. RANGOS SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 OSPREY POINT CIRCLE
 City BOCA RATON State FL Zip Code 33431-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **32400.00**

Date of Receipt **02 / 14 / 2014**
Transaction ID : SA12.15393173
 Amount of Each Receipt this Period **32400.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. HAROLD W. RIPPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1094 GREYSTONE CRST
 City BIRMINGHAM State AL Zip Code 35242-7012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE RIME COMPANIES Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 07 / 2014**
Transaction ID : SA12.15393159
 Amount of Each Receipt this Period **5000.00**
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 436 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. PAUL C. SHIVERICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 SUTTON PLACE S.
 PENTHOUSE A.
 City NEW YORK State NY Zip Code 10022-3071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEMINOLE CAPITAL Occupation INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 19800.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA12.15393191
 Amount of Each Receipt this Period 19800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. MRS. DIANE G. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 BUTTS ROAD
 SUITE 320
 City BOCA RATON State FL Zip Code 33431-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 16000.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA12.15393144
 Amount of Each Receipt this Period 16000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. MR. RON E. SNOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 10665 W. LOYOLA DRIVE
 City LOS ALTOS State CA Zip Code 94024-6514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 02 / 07 / 2014
Transaction ID : SA12.15393166
 Amount of Each Receipt this Period 4800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 437 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MR. TOD SPIEKER
Full Name (Last, First, Middle Initial)

Mailing Address 60 MULBERRY LANE

City State Zip Code
ATHERTON CA 94027-5421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014
Transaction ID : SA12.15393153

Amount of Each Receipt this Period
10000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. MR. MARK STITZER
Full Name (Last, First, Middle Initial)

Mailing Address 290 ROUND HILL ROAD

City State Zip Code
GREENWICH CT 06831-3360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HAMLIN CAPITAL MANAGEMENT INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA12.15393177

Amount of Each Receipt this Period
25000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. MR. TODD WAGNER
Full Name (Last, First, Middle Initial)

Mailing Address 334 EAST LAKE ROAD #176

City State Zip Code
PALM HARBOR FL 34685-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ENTREPRENAUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014
Transaction ID : SA12.15393167

Amount of Each Receipt this Period
4800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 438 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. CALIFORNIA DAIRIES FEDERAL PAC

Mailing Address P.O. BOX 2198

City State Zip Code
LOS BANOS CA 93635-2198

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA12.15393145

Amount of Each Receipt this Period
15000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. GENERAL MOTORS PAC (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE NW SUITE 4
SUITE 400

City State Zip Code
WASHINGTON DC 20001-1427

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014
Transaction ID : SA12.15393146

Amount of Each Receipt this Period
15000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. INTERNATIONAL COUNCIL OF SHOPPING CENTERS PAC

Mailing Address 555 12TH ST NW STE 660

City State Zip Code
WASHINGTON DC 20004-1241

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014
Transaction ID : SA12.15393160

Amount of Each Receipt this Period
5000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 439 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MEDICTRUST LLC

Mailing Address 145 W 55TH STREET
APT. 3C

City NEW YORK State NY Zip Code 10019-5352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt
02 / 24 / 2014
Transaction ID : SA12.15393169

Amount of Each Receipt this Period
4800.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]
SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)
B. NORFOLK SOUTHERN CORP GOOD GOVT. FUND

Mailing Address 3 COMMERCIAL PLACE

City NORFOLK State VA Zip Code 23510-2108

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
02 / 24 / 2014
Transaction ID : SA12.15393147

Amount of Each Receipt this Period
15000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. POWER PAC EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVE. NW
SUITE 214

City WASHINGTON State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
02 / 12 / 2014
Transaction ID : SA12.15393148

Amount of Each Receipt this Period
15000.00

JFC ATTRIB: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 440 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. THE GEO GROUP INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 621 NW 53RD STREET
 SUITE 700
 City BOCA RATON State FL Zip Code 33487-8235
 FEC ID number of contributing federal political committee. **C** C00382150
 Name of Employer Occupation
 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
 02 / 24 / 2014
Transaction ID : SA12.15393155
 Amount of Each Receipt this Period
 10000.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. PRICE FREEDOM FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 CUMBERLAND PKWY
 #150
 City ATLANTA State GA Zip Code 30339-3321
 FEC ID number of contributing federal political committee. **C** C00459529
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 28488.01

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA12.15388803
 Amount of Each Receipt this Period
 28488.01
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. MR. LEO F. WELLS III
 Full Name (Last, First, Middle Initial)
 Mailing Address 9735 FARMBROOK LANE
 UNIT 12
 City ALPHARETTA State GA Zip Code 30022-5503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WELLS REAL ESTATE FUNDS PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2014
Transaction ID : SA12.15388838
 Amount of Each Receipt this Period
 32400.00
 JFC ATTRIB: PRICE FREEDOM FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	28488.01
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 441 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. SCHOCK VICTORY COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 9058
 City PEORIA State IL Zip Code 61612-9058
 FEC ID number of contributing federal political committee. **C** C00469395
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14097.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA12.15331865
 Amount of Each Receipt this Period
 14097.50
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. MR. ROBERT C. MCCORMACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S BEACH RD
 270 WESTMINSTER, #300
 City HOBE SOUND State FL Zip Code 33455-2508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TRIDENT CAPITAL VENTURE CAPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : SA12.15388839
 Amount of Each Receipt this Period
 32400.00
 JFC ATTRIB: SCHOCK VICTORY COMMITTEE
[MEMO ITEM]

C. MS. JULIE A. WEINDLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 W. 55TH ST
 #36
 City NEW YORK State NY Zip Code 10019-5342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDICTRUST LLC HEALTHCARE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA12.15393192
 Amount of Each Receipt this Period
 4800.00
 JFC ATTRIB: BOEHNER FOR SPEAKER
[MEMO ITEM]
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14097.50
TOTAL This Period (last page this line number only).....	658304.97

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 442 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. NRSC-NRCC VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5668.35

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA15-0.001533

Amount of Each Receipt this Period
5668.35

REIMBURSEMENT - FOOD/BEVERAGE

BOBBY VANS STEAKHOUSE - 01/02/14; \$5668.35

B. UNITED HEALTHCARE

Full Name (Last, First, Middle Initial)
Mailing Address 250 N PATRICK BLVD
SUITE 125

City BROOKFIELD State WI Zip Code 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4177.08

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014
Transaction ID : SA15-0.001531

Amount of Each Receipt this Period
1263.04

REFUND - INSURANCE

UNITED HEALTHCARE - 01/24/14; \$56,846.67

C. VERIZON BUSINESS

Full Name (Last, First, Middle Initial)
Mailing Address 500 TECHNOLOGY DR

City WELDON SPRING State MO Zip Code 63304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3003.61

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014
Transaction ID : SA15-0.001529

Amount of Each Receipt this Period
3003.61

REFUND - PHONE SVC

VERIZON BUSINESS - 7/01/13; \$3664.11

SUBTOTAL of Receipts This Page (optional).....	9935.00
TOTAL This Period (last page this line number only).....	9935.00

**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 443 OF 637
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. MRS. CYNTHIA BOICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 OCEAN DRIVE
 UNIT 303
 City MIAMI BEACH State FL Zip Code 33139-7210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 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
 02 / 18 / 2014
Transaction ID : SA17.15373610
 Amount of Each Receipt this Period
 20000.00
 CONTRIBUTION - RECOUNT FUND

B. MR. RICHARD H. DRIEHAUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 E ERIE STREET
 City CHICAGO State IL Zip Code 60611-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DRIEHAUS CAPITAL MANAGEMENT FOUNDER/C.E.O.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA17.15401452C
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION - RECOUNT FUND
[MEMO ITEM]
 REDESIGNATION FROM FEDERAL ACCOUNT

C. MRS. DIANE S. LAKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 TAM O'SHANTER DRIVE
 City BAKERSFIELD State CA Zip Code 93309-2455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA17.15385549
 Amount of Each Receipt this Period
 32400.00
 CONTRIBUTION - RECOUNT FUND

SUBTOTAL of Receipts This Page (optional).....	52400.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 OF 637
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. US TREASURER

Mailing Address 4241 NORTHEAST 34TH ST

City KANSAS CITY State MO Zip Code 64117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.57

Date of Receipt
M M / D D / Y Y Y Y
02 / 21 / 2014
Transaction ID : SA17-0.001528

Amount of Each Receipt this Period
204.57

RESTITUTION

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	204.57
TOTAL This Period (last page this line number only).....▶	52604.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FLEMING FOR CONGRESS

Mailing Address PO BOX 1236

City MINDEN State LA Zip Code 71058

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SB21-0.035944**

Amount of Each Disbursement this Period

264.91

B. DANIEL ABERNATHY

Full Name (Last, First, Middle Initial)

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036087**

Amount of Each Disbursement this Period

1857.76

C. DANIEL ABERNATHY

Full Name (Last, First, Middle Initial)

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036232**

Amount of Each Disbursement this Period

1857.76

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3980.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FREDERIC BARNES

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036088**

Amount of Each Disbursement this Period

915.65

Full Name (Last, First, Middle Initial)

B. FREDERIC BARNES

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036233**

Amount of Each Disbursement this Period

911.07

Full Name (Last, First, Middle Initial)

C. JONATHAN BENNETT

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036089**

Amount of Each Disbursement this Period

2453.05

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4279.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JONATHAN BENNETT

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036234

Amount of Each Disbursement this Period

2441.27

Full Name (Last, First, Middle Initial)

B. ERIN BOYLE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036090

Amount of Each Disbursement this Period

934.12

Full Name (Last, First, Middle Initial)

C. ERIN BOYLE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036235

Amount of Each Disbursement this Period

929.55

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4304.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDREA BOZEK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036091**

Amount of Each Disbursement this Period

3901.78

Full Name (Last, First, Middle Initial)

B. ANDREA BOZEK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036236**

Amount of Each Disbursement this Period

3897.19

Full Name (Last, First, Middle Initial)

C. ELLEN BREDENKOETTER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036092**

Amount of Each Disbursement this Period

1082.79

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8881.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELLEN BREDENKOETTER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21-0.036237

Amount of Each Disbursement this Period

1429.22

Full Name (Last, First, Middle Initial)

B. ERIM V CANLIGIL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21-0.036099

Amount of Each Disbursement this Period

1556.52

Full Name (Last, First, Middle Initial)

C. ERIM V CANLIGIL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21-0.036238

Amount of Each Disbursement this Period

1551.94

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4537.68

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RYAN CARNEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036094

Amount of Each Disbursement this Period

4210.57

Full Name (Last, First, Middle Initial)

B. RYAN CARNEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036239

Amount of Each Disbursement this Period

4198.81

Full Name (Last, First, Middle Initial)

C. DANIEL CHIASSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036095

Amount of Each Disbursement this Period

1429.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9838.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANIEL CHIASSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036240

Amount of Each Disbursement this Period

1424.63

Full Name (Last, First, Middle Initial)

B. ANDREW CLARK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036097

Amount of Each Disbursement this Period

1519.19

Full Name (Last, First, Middle Initial)

C. ANDREW CLARK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036241

Amount of Each Disbursement this Period

1514.60

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4458.42

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANN CLARK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : **SB21-0.036096**

Amount of Each Disbursement this Period

1411.52

Full Name (Last, First, Middle Initial)

B. JEROME J COLE

Mailing Address 1741 SW DAYBREAK WAY

City TROUTDALE State OR Zip Code 97060

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Transaction ID : **SB21-0.036204**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. JOHN R CRISCUOLO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : **SB21-0.036098**

Amount of Each Disbursement this Period

1164.65

SUBTOTAL of Disbursements This Page (optional)..... ▶

4076.17

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOHN R CRISCUOLO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036242

Amount of Each Disbursement this Period

1160.07

Full Name (Last, First, Middle Initial)

B. RYAN CROFT

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036100

Amount of Each Disbursement this Period

1415.72

Full Name (Last, First, Middle Initial)

C. RYAN CROFT

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036243

Amount of Each Disbursement this Period

1403.94

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3979.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MEGAN CUMMINGS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036101

Amount of Each Disbursement this Period

2358.08

Full Name (Last, First, Middle Initial)

B. MEGAN CUMMINGS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036244

Amount of Each Disbursement this Period

2353.50

Full Name (Last, First, Middle Initial)

C. JORDAN N DAVIS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036102

Amount of Each Disbursement this Period

3128.93

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7840.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JORDAN N DAVIS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036245

Amount of Each Disbursement this Period

3117.16

Full Name (Last, First, Middle Initial)

B. PAIGE DAVIS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036103

Amount of Each Disbursement this Period

1424.31

Full Name (Last, First, Middle Initial)

C. PAIGE DAVIS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036246

Amount of Each Disbursement this Period

1419.73

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5961.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT DEMOSS

Mailing Address 100 I ST SE
APT 606

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036206

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

B. WILLIAM DOLBOW

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036105

Amount of Each Disbursement this Period

4280.84

Full Name (Last, First, Middle Initial)

C. WILLIAM DOLBOW

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036247

Amount of Each Disbursement this Period

4269.08

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9199.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JENNIFER S DRUCKER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036167

Amount of Each Disbursement this Period

5127.26

Full Name (Last, First, Middle Initial)

B. JENNIFER S DRUCKER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036308

Amount of Each Disbursement this Period

5115.49

Full Name (Last, First, Middle Initial)

C. RICHARD S DUNN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036106

Amount of Each Disbursement this Period

4695.79

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14938.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RICHARD S DUNN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	4

Transaction ID : SB21-0.036250

Amount of Each Disbursement this Period

4	6	9	1	.	2	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. KATE FAHERTY

Mailing Address 4311 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	4

Transaction ID : SB21-0.035942

Amount of Each Disbursement this Period

4	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. KATE FAHERTY

Mailing Address 4311 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	4

Transaction ID : SB21-0.036209

Amount of Each Disbursement this Period

4	8	0	.	0	0
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5	5	7	1	.	2	1
---	---	---	---	---	---	---

4	8	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANIEL FISHER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21-0.036107**

Amount of Each Disbursement this Period

1259.08

Full Name (Last, First, Middle Initial)

B. DANIEL FISHER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : **SB21-0.036248**

Amount of Each Disbursement this Period

1254.51

Full Name (Last, First, Middle Initial)

C. NICHOLAS FLOCKEN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21-0.036108**

Amount of Each Disbursement this Period

833.43

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3347.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. NICHOLAS FLOCKEN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036249

Amount of Each Disbursement this Period

821.64

Category/
Type

Full Name (Last, First, Middle Initial)

B. GABRIELE FORSYTH

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036109

Amount of Each Disbursement this Period

2785.76

Category/
Type

Full Name (Last, First, Middle Initial)

C. GABRIELE FORSYTH

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036251

Amount of Each Disbursement this Period

2781.18

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6388.58

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAITLIN FRANKLIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036178**

Amount of Each Disbursement this Period

1445.99

Full Name (Last, First, Middle Initial)

B. CAITLIN FRANKLIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036319**

Amount of Each Disbursement this Period

1441.41

Full Name (Last, First, Middle Initial)

C. COREY FRITZ

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036110**

Amount of Each Disbursement this Period

694.51

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3581.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COREY FRITZ

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036252**

Amount of Each Disbursement this Period

689.92

Full Name (Last, First, Middle Initial)

B. CHRIS GEORGIA

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036112**

Amount of Each Disbursement this Period

2277.25

Full Name (Last, First, Middle Initial)

C. CHRIS GEORGIA

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036254**

Amount of Each Disbursement this Period

2272.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5239.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SARAH GERARD

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036113

Amount of Each Disbursement this Period

1404.85

Full Name (Last, First, Middle Initial)

B. SARAH GERARD

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036255

Amount of Each Disbursement this Period

1393.09

Full Name (Last, First, Middle Initial)

C. TESSICA GLANCEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036114

Amount of Each Disbursement this Period

1499.03

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4296.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. TESSICA GLANCEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036256**

Amount of Each Disbursement this Period

1494.44

Full Name (Last, First, Middle Initial)

B. MATTHEW GORMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036115**

Amount of Each Disbursement this Period

1689.58

Full Name (Last, First, Middle Initial)

C. MATTHEW GORMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036257**

Amount of Each Disbursement this Period

1685.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4869.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. JORDAN GRAHAM		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 320 1ST ST SE		Transaction ID : SB21-0.036123
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 1470.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JORDAN GRAHAM		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 320 1ST ST SE		Transaction ID : SB21-0.036258
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 1470.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GEORGE G GRIFFIN		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 320 1ST ST SE		Transaction ID : SB21-0.036117
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 3118.54
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	6058.84
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GEORGE G GRIFFIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036259**

Amount of Each Disbursement this Period

3106.78

Full Name (Last, First, Middle Initial)

B. KEVIN HALL

Mailing Address 7640 NW 54TH AVE

City JOHNSTON State IA Zip Code 50131

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SB21-0.035948**

Amount of Each Disbursement this Period

187.05

Full Name (Last, First, Middle Initial)

C. LAUREN HAMEL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036118**

Amount of Each Disbursement this Period

1328.78

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4622.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LAUREN HAMEL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036260

Amount of Each Disbursement this Period

1317.01

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER HANKS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036119

Amount of Each Disbursement this Period

1701.33

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER HANKS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036261

Amount of Each Disbursement this Period

1696.75

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4715.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CATHERINE HANSEN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036120

Amount of Each Disbursement this Period

599.29

Full Name (Last, First, Middle Initial)

B. CATHERINE HANSEN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036262

Amount of Each Disbursement this Period

594.71

Full Name (Last, First, Middle Initial)

C. LIESL HICKEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036121

Amount of Each Disbursement this Period

5197.38

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6391.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LIESL HICKEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036263

Amount of Each Disbursement this Period

5185.62

Full Name (Last, First, Middle Initial)

B. TYLER HOULTON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036122

Amount of Each Disbursement this Period

2551.56

Full Name (Last, First, Middle Initial)

C. TYLER HOULTON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036264

Amount of Each Disbursement this Period

2546.96

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10284.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GRACE HUFFMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036124

Amount of Each Disbursement this Period

500.51

Full Name (Last, First, Middle Initial)

B. GRACE HUFFMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036265

Amount of Each Disbursement this Period

495.93

Full Name (Last, First, Middle Initial)

C. LAUREN HUTCHINSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036125

Amount of Each Disbursement this Period

1451.90

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2448.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LAUREN HUTCHINSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036266

Amount of Each Disbursement this Period

1447.31

Full Name (Last, First, Middle Initial)

B. BETTINA INCLAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036126

Amount of Each Disbursement this Period

2580.99

Full Name (Last, First, Middle Initial)

C. BETTINA INCLAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036267

Amount of Each Disbursement this Period

2576.42

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6604.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT JENTGENS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036127**

Amount of Each Disbursement this Period

3104.53

Full Name (Last, First, Middle Initial)

B. ROBERT JENTGENS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036268**

Amount of Each Disbursement this Period

3092.76

Full Name (Last, First, Middle Initial)

C. JESSICA F JOHNSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036111**

Amount of Each Disbursement this Period

5085.38

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11282.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JESSICA F JOHNSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036253

Amount of Each Disbursement this Period

5080.80

Full Name (Last, First, Middle Initial)

B. TODD R JOHNSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036128

Amount of Each Disbursement this Period

3769.86

Full Name (Last, First, Middle Initial)

C. TODD R JOHNSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036269

Amount of Each Disbursement this Period

3765.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12615.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT JONES

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036129

Amount of Each Disbursement this Period

2277.25

Full Name (Last, First, Middle Initial)

B. ROBERT JONES

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036270

Amount of Each Disbursement this Period

2272.66

Full Name (Last, First, Middle Initial)

C. MARY E KAHLSTORF-FINNERTY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036130

Amount of Each Disbursement this Period

2400.92

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6950.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MARY E KAHLSTORF-FINNERTY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : **SB21-0.036271**

Amount of Each Disbursement this Period

2389.14

Full Name (Last, First, Middle Initial)

B. MICHAEL R KAPLAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : **SB21-0.036131**

Amount of Each Disbursement this Period

1951.42

Full Name (Last, First, Middle Initial)

C. MICHAEL R KAPLAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : **SB21-0.036272**

Amount of Each Disbursement this Period

1946.83

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6287.39

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALICIA KATZ

Mailing Address 2919 W BAY AVE

City TAMPA State FL Zip Code 33611

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036193

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. ANN KELLY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036132

Amount of Each Disbursement this Period

2620.12

Full Name (Last, First, Middle Initial)

C. ANN KELLY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036280

Amount of Each Disbursement this Period

2615.54

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5485.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ADAM KINCAID

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036133

Amount of Each Disbursement this Period

1448.12

Full Name (Last, First, Middle Initial)

B. ADAM KINCAID

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036279

Amount of Each Disbursement this Period

1448.12

Full Name (Last, First, Middle Initial)

C. DANA KLEIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036134

Amount of Each Disbursement this Period

1503.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4399.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANA KLEIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036278

Amount of Each Disbursement this Period

1498.70

Full Name (Last, First, Middle Initial)

B. JANICE L KNOPP

Mailing Address 236 KENTUCKY AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035954

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. JESSICA LABERGE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036135

Amount of Each Disbursement this Period

1191.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10190.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JESSICA LABERGE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036277

Amount of Each Disbursement this Period

1187.29

Full Name (Last, First, Middle Initial)

B. GERRIT LANSING

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036136

Amount of Each Disbursement this Period

3531.37

Full Name (Last, First, Middle Initial)

C. GERRIT LANSING

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036276

Amount of Each Disbursement this Period

3526.79

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8245.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALEXANDER LAWHON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036137**

Amount of Each Disbursement this Period

4157.01

Full Name (Last, First, Middle Initial)

B. ALEXANDER LAWHON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036275**

Amount of Each Disbursement this Period

4145.24

Full Name (Last, First, Middle Initial)

C. SHAUN LEDGERWOOD

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036138**

Amount of Each Disbursement this Period

2136.67

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10438.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SHAUN LEDGERWOOD

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036274**

Amount of Each Disbursement this Period

2124.90

Full Name (Last, First, Middle Initial)

B. KRISTA MADAIO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036139**

Amount of Each Disbursement this Period

1519.88

Full Name (Last, First, Middle Initial)

C. KRISTA MADAIO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036273**

Amount of Each Disbursement this Period

1515.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5160.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COLTON MALKERSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036140

Amount of Each Disbursement this Period

669.71

Full Name (Last, First, Middle Initial)

B. COLTON MALKERSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036281

Amount of Each Disbursement this Period

665.13

Full Name (Last, First, Middle Initial)

C. ALLISON MARRE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036141

Amount of Each Disbursement this Period

2213.34

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3548.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHRISTINE MARTIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036142

Amount of Each Disbursement this Period

2667.19

Full Name (Last, First, Middle Initial)

B. CHRISTINE MARTIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036282

Amount of Each Disbursement this Period

2662.61

Full Name (Last, First, Middle Initial)

C. KATHRYN MARTIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036143

Amount of Each Disbursement this Period

2675.56

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8005.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KATHRYN MARTIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036283

Amount of Each Disbursement this Period

2663.79

Full Name (Last, First, Middle Initial)

B. MICHELLE MCGANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036144

Amount of Each Disbursement this Period

1519.19

Full Name (Last, First, Middle Initial)

C. MICHELLE MCGANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036285

Amount of Each Disbursement this Period

1514.60

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5697.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DAVID MCGOWAN

Mailing Address 374 TIERRA ST

City HENDERSON State NV Zip Code 89014

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035956

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. JEFFREY MCGOWAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036145

Amount of Each Disbursement this Period

1744.24

Full Name (Last, First, Middle Initial)

C. JEFFREY MCGOWAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036286

Amount of Each Disbursement this Period

1739.65

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3633.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KEVIN W MCGRANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036146**

Amount of Each Disbursement this Period

969.37

Category/
Type

Full Name (Last, First, Middle Initial)

B. KEVIN W MCGRANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036287**

Amount of Each Disbursement this Period

964.79

Category/
Type

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER MCINERNEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036147**

Amount of Each Disbursement this Period

2279.77

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4213.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER MCINERNEY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036288

Amount of Each Disbursement this Period

4396.82

Full Name (Last, First, Middle Initial)

B. JONATHAN MCKINSTRY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036148

Amount of Each Disbursement this Period

1318.46

Full Name (Last, First, Middle Initial)

C. JONATHAN MCKINSTRY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036289

Amount of Each Disbursement this Period

1313.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7029.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ERIN MELLINGER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036149

Amount of Each Disbursement this Period

1419.21

Full Name (Last, First, Middle Initial)

B. ERIN MELLINGER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036290

Amount of Each Disbursement this Period

1419.20

Full Name (Last, First, Middle Initial)

C. ALEXANDER MIEHLS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036150

Amount of Each Disbursement this Period

657.97

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3496.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALEXANDER MIEHLS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036291

Amount of Each Disbursement this Period

653.39

Full Name (Last, First, Middle Initial)

B. BRANDON MOODY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036151

Amount of Each Disbursement this Period

3500.26

Full Name (Last, First, Middle Initial)

C. BRANDON MOODY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036292

Amount of Each Disbursement this Period

3495.68

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7649.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KIMBERLY HP MORELLA

Mailing Address PO BOX 155

City BEDFORD HILLS State NY Zip Code 10507

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **SB21-0.036069**

Amount of Each Disbursement this Period

358.91

Category/
Type

Full Name (Last, First, Middle Initial)

B. SEAN MURPHY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036152**

Amount of Each Disbursement this Period

1477.03

Category/
Type

Full Name (Last, First, Middle Initial)

C. SEAN MURPHY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036293**

Amount of Each Disbursement this Period

1472.44

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3308.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. GEORGE NASSAR

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036153**

Amount of Each Disbursement this Period
2263.53

Full Name (Last, First, Middle Initial)
B. GEORGE NASSAR

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036294**

Amount of Each Disbursement this Period
2258.95

Full Name (Last, First, Middle Initial)
C. EMMA NELSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036154**

Amount of Each Disbursement this Period
2295.95

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6818.43

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. EMMA NELSON

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036295

Amount of Each Disbursement this Period

2291.37

Category/
Type

Full Name (Last, First, Middle Initial)

B. TIMOTHY O'SHEA

Mailing Address 8842 SWALLOW WAY

City FAIR OAKS State CA Zip Code 95628

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036071

Amount of Each Disbursement this Period

150.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. ROBERT OGOREK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036155

Amount of Each Disbursement this Period

1199.57

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3640.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT OGOREK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036296

Amount of Each Disbursement this Period

1194.98

Full Name (Last, First, Middle Initial)

B. ALEXANDRA PAPA

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036159

Amount of Each Disbursement this Period

1260.54

Full Name (Last, First, Middle Initial)

C. ALEXANDRA PAPA

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036297

Amount of Each Disbursement this Period

1255.97

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3711.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SEAN PHILBIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036158

Amount of Each Disbursement this Period

2688.69

Full Name (Last, First, Middle Initial)

B. SEAN PHILBIN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036298

Amount of Each Disbursement this Period

2684.10

Full Name (Last, First, Middle Initial)

C. JOSEPH PILEGGI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036157

Amount of Each Disbursement this Period

2902.37

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8275.16

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOSEPH PILEGGI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036299**

Amount of Each Disbursement this Period

2890.59

Full Name (Last, First, Middle Initial)

B. KATIE POSSEHL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036160**

Amount of Each Disbursement this Period

957.21

Full Name (Last, First, Middle Initial)

C. KATIE POSSEHL

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036300**

Amount of Each Disbursement this Period

952.62

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4800.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. IAN PRIOR

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036161

Amount of Each Disbursement this Period

2919.20

Full Name (Last, First, Middle Initial)

B. IAN PRIOR

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036301

Amount of Each Disbursement this Period

2907.42

Full Name (Last, First, Middle Initial)

C. JASON PUN

Mailing Address 1820 FALCONCREST ST

City TALLAHASSEE State FL Zip Code 32303

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035971

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5976.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JONATHAN REEDY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036162**

Amount of Each Disbursement this Period

2340.92

Full Name (Last, First, Middle Initial)

B. JONATHAN REEDY

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036302**

Amount of Each Disbursement this Period

2336.33

Full Name (Last, First, Middle Initial)

C. KEVIN M REVERRI

Mailing Address 101 ALL ANGELS HILL ROAD

City WAPPINGERS FALLS State NY Zip Code 12590

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SB21-0.036212**

Amount of Each Disbursement this Period

198.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4875.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOHN ROGERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036163

Amount of Each Disbursement this Period

4465.52

Full Name (Last, First, Middle Initial)

B. JOHN ROGERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036303

Amount of Each Disbursement this Period

4453.74

Full Name (Last, First, Middle Initial)

C. GRACEY ROSKAM

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036164

Amount of Each Disbursement this Period

1252.17

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10171.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GRACEY ROSKAM

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036304

Amount of Each Disbursement this Period

1247.58

Full Name (Last, First, Middle Initial)

B. PABLO SANCHEZ

Mailing Address 1032 N DANVILLE ST

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
PERSONNEL SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : SB21-0.035806

Amount of Each Disbursement this Period

6325.00

Full Name (Last, First, Middle Initial)

C. GRANT SAUNDERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036168

Amount of Each Disbursement this Period

1191.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8764.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GRANT SAUNDERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036305

Amount of Each Disbursement this Period

1187.29

Full Name (Last, First, Middle Initial)

B. DANIEL SCARPINATO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036165

Amount of Each Disbursement this Period

3717.10

Full Name (Last, First, Middle Initial)

C. DANIEL SCARPINATO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036306

Amount of Each Disbursement this Period

3712.53

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8616.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MEGAN SCHENEWERK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036166

Amount of Each Disbursement this Period

1319.32

Full Name (Last, First, Middle Initial)

B. MEGAN SCHENEWERK

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036307

Amount of Each Disbursement this Period

1314.73

Full Name (Last, First, Middle Initial)

C. ROBERT SIMMS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036169

Amount of Each Disbursement this Period

4946.34

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7580.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT SIMMS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036309

Amount of Each Disbursement this Period

4888.85

Full Name (Last, First, Middle Initial)

B. CULLEN SMITH

Mailing Address 236 ELLERSILE PARK BLVD

City LEXINGTON State KY Zip Code 40515

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SB21-0.036072

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. NATALIE SOLYOMVANI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036170

Amount of Each Disbursement this Period

1284.04

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6322.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. NATALIE SOLYOMVANI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036310

Amount of Each Disbursement this Period

1279.46

Full Name (Last, First, Middle Initial)

B. SAMANTHA SOUTHERLAND

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036171

Amount of Each Disbursement this Period

1151.79

Full Name (Last, First, Middle Initial)

C. SAMANTHA SOUTHERLAND

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036311

Amount of Each Disbursement this Period

1147.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3578.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. EMILY STIER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036172

Amount of Each Disbursement this Period

674.17

Full Name (Last, First, Middle Initial)

B. EMILY STIER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036312

Amount of Each Disbursement this Period

669.59

Full Name (Last, First, Middle Initial)

C. LYDIA STROM

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036173

Amount of Each Disbursement this Period

1355.83

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2699.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LYDIA STROM

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036313

Amount of Each Disbursement this Period

1351.24

Full Name (Last, First, Middle Initial)

B. HOLLY THURMOND

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036174

Amount of Each Disbursement this Period

2236.12

Full Name (Last, First, Middle Initial)

C. HOLLY THURMOND

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036314

Amount of Each Disbursement this Period

2231.53

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5818.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. WILLIAM J TORANZO

Mailing Address 32 PARK AVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : SB21-0.036073

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. HAMLIN WADE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21-0.036175

Amount of Each Disbursement this Period

1519.19

Full Name (Last, First, Middle Initial)

C. HAMLIN WADE

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21-0.036315

Amount of Each Disbursement this Period

1514.60

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3183.79

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DAVID WATTS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	4

Transaction ID : SB21-0.036176

Amount of Each Disbursement this Period

3	1	2	7	9	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. DAVID WATTS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	4

Transaction ID : SB21-0.036316

Amount of Each Disbursement this Period

3	1	1	6	1	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CASEY WEBSTER

Mailing Address 1420 BIRCHWOOD AVE
APT 307

City BELLINGHAM State WA Zip Code 98225

Purpose of Disbursement
RESEARCH MATERIALS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	1	4

Transaction ID : SB21-0.036075

Amount of Each Disbursement this Period

1	5	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6	3	9	4	1	4
---	---	---	---	---	---

3	1	2	7	9	6
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KATHERINE WILLIAMS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036177**

Amount of Each Disbursement this Period

2208.55

Full Name (Last, First, Middle Initial)

B. KATHERINE WILLIAMS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036317**

Amount of Each Disbursement this Period

2203.97

Full Name (Last, First, Middle Initial)

C. CHIVAUN WOLTER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036179**

Amount of Each Disbursement this Period

1089.31

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5501.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHIVAUN WOLTER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036321

Amount of Each Disbursement this Period

1084.74

Full Name (Last, First, Middle Initial)

B. MICAH YOUSEFI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036180

Amount of Each Disbursement this Period

1396.42

Full Name (Last, First, Middle Initial)

C. MICAH YOUSEFI

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036323

Amount of Each Disbursement this Period

1391.83

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3872.99

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KEVIN ZAMBRANO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036181

Amount of Each Disbursement this Period

1357.49

Full Name (Last, First, Middle Initial)

B. KEVIN ZAMBRANO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036325

Amount of Each Disbursement this Period

1352.92

Full Name (Last, First, Middle Initial)

C. AIRNET GROUP INC

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401-2181

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036214

Amount of Each Disbursement this Period

793.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3503.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICA DIRECT INC

Mailing Address 1272 CORPORATE PARK DRIVE
2ND FL

City FOREST State VA Zip Code 24551

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SB21-0.036189

Amount of Each Disbursement this Period

49469.46

Full Name (Last, First, Middle Initial)

B. AMERICA RISING LLC

Mailing Address 138 CONANT ST
1ST FLR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SB21-0.035922

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265-0448

Purpose of Disbursement
CREDIT CARD - TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036015

Amount of Each Disbursement this Period

570.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

60040.12

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-999777

Amount of Each Disbursement this Period

447.66

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036079

Amount of Each Disbursement this Period

3860.44

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036083

Amount of Each Disbursement this Period

1098.44

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4958.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : SB21-0.036085

Amount of Each Disbursement this Period

122.16

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : SB21-0.036223

Amount of Each Disbursement this Period

96.99

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : SB21-0.039114

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

219.15

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : SB21-0.039116

Amount of Each Disbursement this Period

723.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2014

Transaction ID : SB21-0.036224

Amount of Each Disbursement this Period

723.09

Full Name (Last, First, Middle Initial)

C. CONGRESSIONAL LIQUORS

Mailing Address 404 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2014

Transaction ID : SB21-0.039112

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

723.09

723.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COSI

Mailing Address 1751 LAKE COOK RD

City CHICAGO State IL Zip Code 60015

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2014

Transaction ID : SB21-0.039106

Amount of Each Disbursement this Period

137.89

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. POTBELLY SANDWICH WORKS

Mailing Address 222 MERCHANDISE MART PLZ
#230

City CHICAGO State IL Zip Code 60654

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2014

Transaction ID : SB21-0.039104

Amount of Each Disbursement this Period

152.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TORTILLA COAST

Mailing Address 400 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2014

Transaction ID : SB21-0.039110

Amount of Each Disbursement this Period

41.03

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 2345 CRYSTAL DR

City ARLINGTON State VA Zip Code 22227

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2014

Transaction ID : **SB21-0.039108**

Amount of Each Disbursement this Period

384.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.036225**

Amount of Each Disbursement this Period

93963.25

Full Name (Last, First, Middle Initial)

C. 37 SIGNALS DOT COM

Mailing Address 400 N MAY ST
STE 301

City CHICAGO State IL Zip Code 60622

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.038974**

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

93963.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ADOBE SYSTEMS

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110-2704

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.038976**

Amount of Each Disbursement this Period

253.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMAZON WEB SERVICES

Mailing Address PO BOX 81226

City SEATTLE State WA Zip Code 98108

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.038980**

Amount of Each Disbursement this Period

58.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 1200 12TH AVE

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.038978**

Amount of Each Disbursement this Period

52.82

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address 1200 12TH AVE

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.038982

Amount of Each Disbursement this Period

14.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 1200 12TH AVE

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.038984

Amount of Each Disbursement this Period

200.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 620081

City DALLAS State TX Zip Code 75262

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.038986

Amount of Each Disbursement this Period

1241.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 620081

City DALLAS State TX Zip Code 75262

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.038988

Amount of Each Disbursement this Period

698.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. APPLE INC

Mailing Address 1 INFINITE LOOP

City CUPERTINO State CA Zip Code 95014

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039038

Amount of Each Disbursement this Period

317.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197-6463

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.038990

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AYA GROUP INC

Mailing Address 201 W GARVEY AVE
#102-181

City MONTEREY PARK State CA Zip Code 91754

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.038992

Amount of Each Disbursement this Period

28.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BARNES AND NOBLE DOT COM

Mailing Address PO BOX 111

City LYNDHURST State NJ Zip Code 07071

Purpose of Disbursement
DONOR MEMENTOS- BOOKS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.038994

Amount of Each Disbursement this Period

574.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BARRACUDA NETWORKS INC

Mailing Address DEPT LA 22762

City PASADENA State CA Zip Code 91185-2762

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.038996

Amount of Each Disbursement this Period

2298.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BENEVA FLOWERS & GIFTS

Mailing Address 6980 BENEVA RD

City SARASOTA State FL Zip Code 34238

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : **SB21-0.039078**

Amount of Each Disbursement this Period

1	0	6	.	2	5
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BOSTON COACH COMPANY

Mailing Address 70 FARGO ST
8TH FLOOR

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : **SB21-0.038998**

Amount of Each Disbursement this Period

9	2	1	.	7	2
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CBT NUGGETS

Mailing Address 44 CLUB RD
STE 150

City EUGENE State OR Zip Code 97401

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : **SB21-0.039001**

Amount of Each Disbursement this Period

9	9	.	0	0
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
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0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039003

Amount of Each Disbursement this Period

424.81

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CITRIX SYSTEMS

Mailing Address 7414 HOLLISTER AVE

City GOLETA State CA Zip Code 93117

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039030

Amount of Each Disbursement this Period

51.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COMCAST CABLE

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398-3005

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039005

Amount of Each Disbursement this Period

115.90

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CONFERENCE AMERICA INC

Mailing Address PO BOX 241188

City MONTGOMERY State AL Zip Code 36124-1188

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : SB21-0.039006

Amount of Each Disbursement this Period

6	3	6	.	8	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CONGRESSIONAL QUARTERLY INC

Mailing Address 77 K ST NE
8TH FLOOR

City WASHINGTON State DC Zip Code 20002-4681

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : SB21-0.039010

Amount of Each Disbursement this Period

1	4	4	4	2	.	5	1
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COSI

Mailing Address 1751 LAKE COOK RD

City CHICAGO State IL Zip Code 60015

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	1	4		

Transaction ID : SB21-0.039008

Amount of Each Disbursement this Period

1	6	7	.	4	6
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
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0	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES INC		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address PO BOX 20706		Transaction ID : SB21-0.039012
City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period 199.00	
Purpose of Disbursement TRAVEL	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES INC		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address PO BOX 20706		Transaction ID : SB21-0.039014
City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period 199.00	
Purpose of Disbursement TRAVEL	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. DES MOINES REGISTER		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address 400 LOCUST ST STE 500		Transaction ID : SB21-0.038966
City DES MOINES State IA Zip Code 50309	Amount of Each Disbursement this Period 10.00	
Purpose of Disbursement SUBSCRIPTIONS	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DROPBOX INC

Mailing Address 760 MARKET ST
STE 1150

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.039016**

Amount of Each Disbursement this Period

13.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DUNKIN BRANDS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.039018**

Amount of Each Disbursement this Period

305.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EXPERTS EXCHANGE

Mailing Address PO BOX 1062

City SAN LUIS OBISPO State CA Zip Code 93406

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SB21-0.039022**

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City PALO ALTO State CA Zip Code 94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039024

Amount of Each Disbursement this Period

9060.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GIANT FOOD

Mailing Address 8301 PROFESSIONAL PL
STE 115

City LANDOVER State MD Zip Code 20785

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039061

Amount of Each Disbursement this Period

216.66

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN RD
STE 226

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039026

Amount of Each Disbursement this Period

4330.11

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GONAME INC

Mailing Address 3200 WEST END AVE
STE 500

City NASHVILLE State TN Zip Code 37203

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039059

Amount of Each Disbursement this Period

594.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GOOGLE INC

Mailing Address DEPT. 33654
PO BOX 39000

City SAN FRANCISCO State CA Zip Code 94139

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039028

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039020

Amount of Each Disbursement this Period

518.38

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039034

Amount of Each Disbursement this Period

465.66

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOOTSUITE MEDIA

Mailing Address 37 DUNLEVY AVE
CANADA

City VANCOUVER State FF Zip Code 99999

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039036

Amount of Each Disbursement this Period

20.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HYATT HOTELS

Mailing Address 71 S WACKER DR
16TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039032

Amount of Each Disbursement this Period

822.16

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. KILLER TRACKS

Mailing Address 15044 COLLECTIONS CENTER DR

City CHICAGO State IL Zip Code 60693

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039040

Amount of Each Disbursement this Period

195.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. LEADERSHIP DIRECTORIES INC

Mailing Address 104 5TH AVE, 3RD FLOOR

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039042

Amount of Each Disbursement this Period

5400.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. LEXIS-NEXIS

Mailing Address PO BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170-7090

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039057

Amount of Each Disbursement this Period

16828.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LYNDA.COM

Mailing Address 6410 VIA REAL

City CARPINTERIA State CA Zip Code 93013

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039044

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MAIL CHIMP

Mailing Address 512 MEANS ST
STE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039046

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. NEMACOLIN WOODLANDS RESORT

Mailing Address 1001 LAFAYETTE DR

City FARMINGTON State PA Zip Code 15437

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039053

Amount of Each Disbursement this Period

15000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. NEW EGG.COM

Mailing Address 16839 E GALA AVE

City State Zip Code
INDUSTRY CA 91745

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039051

Amount of Each Disbursement this Period

238.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. OVERSTOCK.COM

Mailing Address 6350 S 3000 EAST

City State Zip Code
SALT LAKE CITY UT 84121

Purpose of Disbursement
FURNITURE PURCHASE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039055

Amount of Each Disbursement this Period

99.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. PANAMA CITY FLORIST & GIFTS

Mailing Address 755 HARRISON

City State Zip Code
PANAMA CITY FL 32402

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039080

Amount of Each Disbursement this Period

52.68

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PROJECTOR LAMPS WORLD

Mailing Address 293 E REDONDO BEACH BLVD

City GARDENA State CA Zip Code 90248

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039064

Amount of Each Disbursement this Period

153.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RACKSPACE MANAGED HOSTING

Mailing Address PO BOX 730759

City DALLAS State TX Zip Code 75373-0759

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039066

Amount of Each Disbursement this Period

46.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ST REGIS DC

Mailing Address 923 16TH ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039068

Amount of Each Disbursement this Period

1347.69

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. STANFORD TERRACE INN

Mailing Address 531 STANFORD AVE

City PALO ALTO State CA Zip Code 94306

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039070**

Amount of Each Disbursement this Period

1254.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SYMANTEC CORPORATION

Mailing Address 350 ELLIS ST

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039072**

Amount of Each Disbursement this Period

273.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. THE MAP SHOP

Mailing Address 1500 E MOREHEAD ST

City CHARLOTTE State NC Zip Code 28207

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039074**

Amount of Each Disbursement this Period

43.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE NEW YORK PALACE HOTEL

Mailing Address 455 MADISON AVE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039076**

Amount of Each Disbursement this Period

601.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES INC

Mailing Address 77 W WACKER DR

City CHICAGO State IL Zip Code 60601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039082**

Amount of Each Disbursement this Period

3149.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UPS

Mailing Address PO BOX 7247-0244

City PHILADELPHIA State PA Zip Code 19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB21-0.039084**

Amount of Each Disbursement this Period

610.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 2345 CRYSTAL DR

City ARLINGTON State VA Zip Code 22227

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039086

Amount of Each Disbursement this Period

158.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 2345 CRYSTAL DR

City ARLINGTON State VA Zip Code 22227

Purpose of Disbursement
CREDIT - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039087

Amount of Each Disbursement this Period

-2730.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US POSTMASTER

Mailing Address 900 BRENTWOOD ROAD NE

City WASHINGTON State DC Zip Code 20018-1004

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21-0.039090

Amount of Each Disbursement this Period

388.85

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address PO BOX 660720

City DALLAS State TX Zip Code 75266-0720

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039092

Amount of Each Disbursement this Period

1711.28

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address PO BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002-5505

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039094

Amount of Each Disbursement this Period

4950.93

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. WALL STREET JOURNAL

Mailing Address 84 SECOND AVE

City CHICOPEE State MA Zip Code 01020

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039096

Amount of Each Disbursement this Period

24.31

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. WASHINGTON METRO AREA TRANSIT AUTHORITY

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039048

Amount of Each Disbursement this Period

2524.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. WP ENGINE

Mailing Address 701 BRAZOS ST STE 1602

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039100

Amount of Each Disbursement this Period

448.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. WUFOO INFINITY BOX INC

Mailing Address 12157 W LINEBAUGH AVE

City TAMPA State FL Zip Code 33626

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SB21-0.039102

Amount of Each Disbursement this Period

69.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ASHLEY EVENTS LLC

Mailing Address 5871 HANCOCK RD

City State Zip Code
SOUTHWEST RANCHES FL 33330

Purpose of Disbursement
STAGING/EVENT SET-UP FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036190

Amount of Each Disbursement this Period

169666.18

Category/
Type

Full Name (Last, First, Middle Initial)

B. ASSOCIATED PRESS

Mailing Address PO BOX 414212

City State Zip Code
BOSTON MA 02241-4212

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035924

Amount of Each Disbursement this Period

1608.85

Category/
Type

Full Name (Last, First, Middle Initial)

C. AUTOMATIC DATA PROCESSING

Mailing Address PO BOX 842875

City State Zip Code
BOSTON MA 02284-2875

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035920

Amount of Each Disbursement this Period

489.78

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

171764.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AUTOMATIC DATA PROCESSING

Mailing Address PO BOX 842875

City BOSTON State MA Zip Code 02284-2875

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036063

Amount of Each Disbursement this Period

517.70

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR SYSTEM INC

Mailing Address 7876 COLLECTIONS CENTER DR

City CHICAGO State IL Zip Code 60693

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036017

Amount of Each Disbursement this Period

874.67

Full Name (Last, First, Middle Initial)

C. BMO CONSULTING

Mailing Address 70 I ST SE #734

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035926

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8892.37

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BREEZIN ENTERTAINMENT

Mailing Address 3711 W SWANN AVE

City TAMPA State FL Zip Code 33609

Purpose of Disbursement
MUSICAL ENTERTAINMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036064

Amount of Each Disbursement this Period

1150.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036019

Amount of Each Disbursement this Period

7407.79

Category/
Type

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036065

Amount of Each Disbursement this Period

118.67

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8676.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL LISTS LLC

Mailing Address 1252 RAMBLING RILL CIRCLE

City STATHAM State GA Zip Code 30666

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036202

Amount of Each Disbursement this Period

89992.07

Full Name (Last, First, Middle Initial)

B. CENTER FOR STRATEGIC INITIATIVES

Mailing Address 814 KING ST
STE 420

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036020

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CENTURY LINK

Mailing Address PO BOX 52187

City PHOENIX State AZ Zip Code 85072-2187

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035929

Amount of Each Disbursement this Period

148.81

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

92140.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHELSEA CREATIVE SOLUTIONS LLC

Mailing Address 909 NEW JERSEY AVE SE
STE 905

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035930

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035932

Amount of Each Disbursement this Period

30680.28

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036203

Amount of Each Disbursement this Period

2128.78

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

37809.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COGENT COMMUNICATIONS INC

Mailing Address PO BOX 791087

City BALTIMORE State MD Zip Code 21279-1087

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035934

Amount of Each Disbursement this Period

2100.00

B. COMMUNICATION CORP OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035936

Amount of Each Disbursement this Period

53647.62

C. COMMUNICATION CORP OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036021

Amount of Each Disbursement this Period

2444.06

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

58191.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COMMUNICATION CORP OF AMERICA

Mailing Address 13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SB21-0.036205

Amount of Each Disbursement this Period

274975.57

Full Name (Last, First, Middle Initial)

B. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036184

Amount of Each Disbursement this Period

217.43

Full Name (Last, First, Middle Initial)

C. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21-0.036333

Amount of Each Disbursement this Period

217.43

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

275410.43

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CONCUR TECHNOLOGIES INC

Mailing Address 601 108TH AVE NE
SUITE 1000

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL SERVICES PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035916

Amount of Each Disbursement this Period

2299.86

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55670

Amount of Each Disbursement this Period

383.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55672

Amount of Each Disbursement this Period

203.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2299.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55673

Amount of Each Disbursement this Period

49.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. THE WESTIN

Mailing Address 270 W 43RD ST

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55671

Amount of Each Disbursement this Period

246.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55674

Amount of Each Disbursement this Period

303.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPA State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55675

Amount of Each Disbursement this Period

406.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.55676

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CONCUR TECHNOLOGIES INC

Mailing Address 62157 COLLECTIONS CENTER DR

City CHICAGO State IL Zip Code 60693

Purpose of Disbursement
TRAVEL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036023

Amount of Each Disbursement this Period

594.84

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

594.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CONCUR TECHNOLOGIES INC

Mailing Address 601 108TH AVE NE
SUITE 1000

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL SERVICES PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036049

Amount of Each Disbursement this Period

9747.20

Full Name (Last, First, Middle Initial)

B. ALASKA AIRLINES

Mailing Address P.O. BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21B.55689

Amount of Each Disbursement this Period

614.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVIS

Mailing Address 4030 GEORGE J BEAN INBOUND PKWY #1

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21B.55679

Amount of Each Disbursement this Period

107.44

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9747.20

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 4030 GEORGE J BEAN INBOUND PKWY #1

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55680

Amount of Each Disbursement this Period

256.79

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55690

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVIS

Mailing Address 4030 GEORGE J BEAN INBOUND PKWY #1

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55691

Amount of Each Disbursement this Period

142.75

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55681

Amount of Each Disbursement this Period

221.74

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55682

Amount of Each Disbursement this Period

223.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55692

Amount of Each Disbursement this Period

421.27

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55711

Amount of Each Disbursement this Period

475.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55712

Amount of Each Disbursement this Period

241.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55713

Amount of Each Disbursement this Period

201.58

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55677

Amount of Each Disbursement this Period

49.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55702

Amount of Each Disbursement this Period

5.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 02003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55703

Amount of Each Disbursement this Period

32.69

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

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	2		1	4		2	0	1	4

Transaction ID : SB21B.55704

Amount of Each Disbursement this Period

1	7	.	3	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

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	2		1	4		2	0	1	4

Transaction ID : SB21B.55705

Amount of Each Disbursement this Period

8	9	.	7	3
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

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	2		1	4		2	0	1	4

Transaction ID : SB21B.55706

Amount of Each Disbursement this Period

1	6	.	8	5
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	.	0	0
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0	0	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HAMPTON INN

Mailing Address 5001 FLEUR DRIVE

City DES MOINES State IA Zip Code 50321

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21B.55678**

Amount of Each Disbursement this Period

420.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HAMPTON INN

Mailing Address 21030 US HWY 19N

City CLEARWATER State FL Zip Code 33765

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21B.55683**

Amount of Each Disbursement this Period

244.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HARRIS TEETER

Mailing Address 1350 POTOMAC AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21B.55707**

Amount of Each Disbursement this Period

292.51

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55684

Amount of Each Disbursement this Period

36.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55685

Amount of Each Disbursement this Period

11.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55693

Amount of Each Disbursement this Period

27.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55694

Amount of Each Disbursement this Period

55.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55695

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55696

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55714

Amount of Each Disbursement this Period

23.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55715

Amount of Each Disbursement this Period

17.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55716

Amount of Each Disbursement this Period

89.62

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 27-01 QUEENS PLAZA NORTH

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21B.55686**

Amount of Each Disbursement this Period

84.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 27-01 QUEENS PLAZA NORTH

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21B.55717**

Amount of Each Disbursement this Period

180.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. PAYLESS CAR RENTAL

Mailing Address 1965 N WEST SHORE BLVD

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21B.55718**

Amount of Each Disbursement this Period

481.14

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RAMADA

Mailing Address 1200 N WESTSHORE BLVD

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	4		

Transaction ID : SB21B.55719

Amount of Each Disbursement this Period

3	2	2	.	5	3
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	4		

Transaction ID : SB21B.55708

Amount of Each Disbursement this Period

6	5	8	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TOBY TOURS

Mailing Address 145 CARTER AVE

City LOUISVILLE State KY Zip Code 40229

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	4		

Transaction ID : SB21B.55709

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. TORTILLA COAST

Mailing Address 400 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55710

Amount of Each Disbursement this Period

94.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 182 HOWARD ST STE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55697

Amount of Each Disbursement this Period

12.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 186 HOWARD ST STE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55698

Amount of Each Disbursement this Period

9.34

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 181 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21B.55720

Amount of Each Disbursement this Period

22.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City State Zip Code
TEMPE AZ 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21B.55687

Amount of Each Disbursement this Period

174.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City State Zip Code
TEMPE AZ 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21B.55688

Amount of Each Disbursement this Period

348.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55699

Amount of Each Disbursement this Period

223.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55700

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.55701

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55721

Amount of Each Disbursement this Period

135.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55722

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21B.55723

Amount of Each Disbursement this Period

180.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21B.55724

Amount of Each Disbursement this Period

11978.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CONCUR TECHNOLOGIES INC

Mailing Address 601 108TH AVE NE
SUITE 1000

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL SERVICES PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21-0.036230

Amount of Each Disbursement this Period

11978.42

Full Name (Last, First, Middle Initial)

C. ALAMO RENT A CAR

Mailing Address 4030 GEORGE J BEAN INBOUND PKWY #1

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55748

Amount of Each Disbursement this Period

309.89

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11978.42

11978.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55732

Amount of Each Disbursement this Period

271.87

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AVIS

Mailing Address 1805 SKY HARBOR CIRCLE

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55744

Amount of Each Disbursement this Period

520.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55749

Amount of Each Disbursement this Period

232.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55750

Amount of Each Disbursement this Period

370.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AVIS

Mailing Address 850 GALLATIN FIELD RD #2

City BELGRADE State MT Zip Code 59714

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55774

Amount of Each Disbursement this Period

224.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVIS

Mailing Address 850 GALLATIN FIELD RD #2

City BELGRADE State MT Zip Code 59714

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55775

Amount of Each Disbursement this Period

246.55

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55729

Amount of Each Disbursement this Period

403.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CAUSEWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55733

Amount of Each Disbursement this Period

246.38

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BEST WESTERN

Mailing Address 7700 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55751

Amount of Each Disbursement this Period

201.58

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CPAC

Mailing Address 1331 H STREET NW, SUITE 500

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55752

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55734

Amount of Each Disbursement this Period

234.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55735

Amount of Each Disbursement this Period

434.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DOUBLE TREE

Mailing Address 4500 W. CYPRESS ST.

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	4

Transaction ID : SB21B.55736

Amount of Each Disbursement this Period

3	1	1	3	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN & SUITES

Mailing Address 3092 PIEDMONT ROAD NORTHEAST

City ATLANTA State GA Zip Code 30305

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	4

Transaction ID : SB21B.55737

Amount of Each Disbursement this Period

6	1	7	0	2
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN & SUITES

Mailing Address 2026 OVERLAND AVE

City BILLINGS State MT Zip Code 59102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	4

Transaction ID : SB21B.55776

Amount of Each Disbursement this Period

1	0	6	8	6
---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

0	0	0
---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN & SUITES

Mailing Address 828 WHEAT DRIVE

City BOZEMAN State MT Zip Code 59715

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55777

Amount of Each Disbursement this Period

105.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN & SUITES

Mailing Address 828 WHEAT DRIVE

City BOZEMAN State MT Zip Code 59715

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55778

Amount of Each Disbursement this Period

96.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55725

Amount of Each Disbursement this Period

13.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55738

Amount of Each Disbursement this Period

111.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55753

Amount of Each Disbursement this Period

35.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55754

Amount of Each Disbursement this Period

12.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOGANS BEACH

Mailing Address 7701 COURTNEY CAMPBELL CSWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55755

Amount of Each Disbursement this Period

39.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 27-01 QUEENS PLAZA NORTH

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55726

Amount of Each Disbursement this Period

129.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MATTISON'S CITY GRILLE

Mailing Address 1 LEMON AVENUE

City SARASOTA State FL Zip Code 34236

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55756

Amount of Each Disbursement this Period

518.64

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RAMADA

Mailing Address 1200 N WESTSHORE BLVD

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55739

Amount of Each Disbursement this Period

221.74

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RESIDENCE INN

Mailing Address 2777 ZUNI STREET

City DENVER State CO Zip Code 80211

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55779

Amount of Each Disbursement this Period

444.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RITZ CARLTON BUSINESS CENTER

Mailing Address 1392 BORREGAS AVE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55757

Amount of Each Disbursement this Period

18.19

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RITZ CARLTON BUSINESS CENTER

Mailing Address 1392 BORREGAS AVE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55758

Amount of Each Disbursement this Period

61.52

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RITZ CARLTON BUSINESS CENTER

Mailing Address 1392 BORREGAS AVE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55759

Amount of Each Disbursement this Period

119.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RITZ CARLTON BUSINESS CENTER

Mailing Address 1392 BORREGAS AVE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55760

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55745

Amount of Each Disbursement this Period

217.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55746

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21B.55747

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 185 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55740

Amount of Each Disbursement this Period

14.57

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 183 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55763

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 184 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55764

Amount of Each Disbursement this Period

11.71

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55727

Amount of Each Disbursement this Period

240.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55728

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55730

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55731

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55741

Amount of Each Disbursement this Period

174.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.55742

Amount of Each Disbursement this Period

174.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55743

Amount of Each Disbursement this Period

407.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55761

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55762

Amount of Each Disbursement this Period

321.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55765

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55766

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55767

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55768

Amount of Each Disbursement this Period

235.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55769

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55770

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55771

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55772

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 91361

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SB21B.55773

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CONCUR TECHNOLOGIES INC

Mailing Address 601 108TH AVE NE
SUITE 1000

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL SERVICES PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	4		

Transaction ID : **SB21-0.036231**

Amount of Each Disbursement this Period

6	3	8	2	.	3	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 50 MASSACHUSETTES AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	4		

Transaction ID : **SB21B.55780**

Amount of Each Disbursement this Period

2	3	1	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 50 MASSACHUSETTES AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	4		

Transaction ID : **SB21B.55781**

Amount of Each Disbursement this Period

1	8	6	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6	3	8	2	.	3	6
---	---	---	---	---	---	---

6	3	8	2	.	3	6
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55801

Amount of Each Disbursement this Period

292.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55782

Amount of Each Disbursement this Period

19.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55783

Amount of Each Disbursement this Period

15.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55784

Amount of Each Disbursement this Period

20.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55798

Amount of Each Disbursement this Period

185.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CANDLEWOOD SUITES

Mailing Address 13231 49TH ST NORTH

City CLEARWATER State FL Zip Code 33762

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55802

Amount of Each Disbursement this Period

671.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. OLD HOMESTEAD STEAKHOUSE

Mailing Address 56 NINTH AVE

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21B.55785

Amount of Each Disbursement this Period

213.81

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. POURHOUSE / TOP OF THE HILL

Mailing Address 319 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21B.55788

Amount of Each Disbursement this Period

567.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. POURHOUSE / TOP OF THE HILL

Mailing Address 319 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2014

Transaction ID : SB21B.55789

Amount of Each Disbursement this Period

1593.47

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROSE'S LUXURY

Mailing Address 717 8TH ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55790

Amount of Each Disbursement this Period

231.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55791

Amount of Each Disbursement this Period

390.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55792

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55793

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TELEVISION MONITORING SERVICES, INC

Mailing Address 4132 S. RAINBOW BLVD. #213

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55799

Amount of Each Disbursement this Period

304.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. THE WESTIN

Mailing Address 270 WEST 43RD STREET

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55786

Amount of Each Disbursement this Period

262.43

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. TORTILLA COAST

Mailing Address 400 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55787

Amount of Each Disbursement this Period

17.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TORTILLA COAST

Mailing Address 400 FIRST ST SE

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55800

Amount of Each Disbursement this Period

97.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 187 HOWARD ST STE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SB21B.55794

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 188 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21B.55795**

Amount of Each Disbursement this Period

74.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 189 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21B.55796**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 190 HOWARD ST STE 8

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21B.55797**

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55803

Amount of Each Disbursement this Period

303.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21B.55804

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CT JENSEN & ASSOCIATES

Mailing Address 4961 FALLCREST CIRCLE

City SARASOTA State FL Zip Code 34233

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035940

Amount of Each Disbursement this Period

8000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DC TREASURER

Mailing Address PO BOX 37630

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036182

Amount of Each Disbursement this Period

10143.47

Full Name (Last, First, Middle Initial)

B. DC TREASURER

Mailing Address PO BOX 1582

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036183

Amount of Each Disbursement this Period

2325.65

Full Name (Last, First, Middle Initial)

C. DC TREASURER

Mailing Address PO BOX 1582

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036335

Amount of Each Disbursement this Period

1567.78

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14036.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DC TREASURER

Mailing Address PO BOX 37630

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036337

Amount of Each Disbursement this Period

10455.35

Full Name (Last, First, Middle Initial)

B. DHW ASSOCIATES

Mailing Address 16301 KELLY WOODS DRIVE, #206

City FT MYERS State FL Zip Code 33908

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036207

Amount of Each Disbursement this Period

847.76

Full Name (Last, First, Middle Initial)

C. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S WASHINGTON ST
STE B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036208

Amount of Each Disbursement this Period

7212.48

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

18515.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DMM MEDIA INC

Mailing Address 1911 NORTH FORT MYER DR
SUITE 400

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2014

Transaction ID : **SB21-0.036221**

Amount of Each Disbursement this Period

12985.13

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : **SB21-0.036077**

Amount of Each Disbursement this Period

5081.08

Full Name (Last, First, Middle Initial)

C. ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : **SB21-0.036080**

Amount of Each Disbursement this Period

45.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

18111.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036082

Amount of Each Disbursement this Period

4434.09

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036084

Amount of Each Disbursement this Period

1011.31

Full Name (Last, First, Middle Initial)

C. ESI STRATEGIES LLC

Mailing Address 410 RIVERVIEW DR

City CHURCH HILL State TN Zip Code 37642

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036048

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7945.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD
STE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035946

Amount of Each Disbursement this Period

14786.90

Full Name (Last, First, Middle Initial)

B. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD
STE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036191

Amount of Each Disbursement this Period

77920.60

Full Name (Last, First, Middle Initial)

C. GS STRATEGY GROUP

Mailing Address 350 N 9TH ST
SUITE 550

City BOISE State ID Zip Code 83702

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036081

Amount of Each Disbursement this Period

17300.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

110007.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GUARDIAN LIFE INSURANCE COMPANY

Mailing Address PO BOX 677458

City DALLAS State TX Zip Code 75267-7458

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036210

Amount of Each Disbursement this Period

5990.27

Full Name (Last, First, Middle Initial)

B. GULF COAST FISHING CHARTERS

Mailing Address 761 JOHN RINGLING BLVD

City SARASOTA State FL Zip Code 34236

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036192

Amount of Each Disbursement this Period

1560.00

Full Name (Last, First, Middle Initial)

C. HARBINGER LLC

Mailing Address 200 LUNA PARK DR
STE 424

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036025

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10550.27

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DR
SUITE 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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SB21-0.036066

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

B. HOON DESIGNS LLC

Mailing Address 2800 SHIRLINGTON RD
STE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036213

Amount of Each Disbursement this Period

1600.00

Full Name (Last, First, Middle Initial)

C. IMGE

Mailing Address 603 KING ST
4TH FLR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035950

Amount of Each Disbursement this Period

2899.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12499.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. INFOGROUP

Mailing Address PO BOX 3243

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : SB21-0.035952

Amount of Each Disbursement this Period

1603.85

Full Name (Last, First, Middle Initial)

B. IQ MEDIA

Mailing Address 10 CAMPUS BLVD

City NEWTON SQUARE State PA Zip Code 19073

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036027

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. LAURA BELL CONSULTING INC

Mailing Address PO BOX 3591

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036029

Amount of Each Disbursement this Period

2804.40

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6908.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LEVEL 3 COMMUNICATIONS LLC

Mailing Address PO BOX 910182

City DENVER State CO Zip Code 80291-0182

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036032**

Amount of Each Disbursement this Period

1425.59

Full Name (Last, First, Middle Initial)

B. LISA WAGNER & COMPANY INC.

Mailing Address PO BOX 446

City BATAVIA State IL Zip Code 60510

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **SB21-0.036067**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. LN CONSULTING

Mailing Address 121 STATE ST

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036033**

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10425.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MAIL AMERICA COMMUNICATIONS INC

Mailing Address 1174 ELKTON FARM RD

City FOREST State VA Zip Code 24551

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2014

Transaction ID : **SB21-0.035907**

Amount of Each Disbursement this Period

17026.88

Full Name (Last, First, Middle Initial)

B. MARTINAIR INC

Mailing Address PO BOX 485

City SANDSTON State VA Zip Code 23150

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036035**

Amount of Each Disbursement this Period

4091.17

Full Name (Last, First, Middle Initial)

C. MCLAUGHLIN AND ASSOCIATES INC

Mailing Address 566 S RT 303

City BLAUVELT State NY Zip Code 10913

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036037**

Amount of Each Disbursement this Period

11750.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

32868.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MERIDIAN IMAGING SOL. INC

Mailing Address PO BOX 41602

City PHILADELPHIA State PA Zip Code 19101-1602

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB21-0.036041

Amount of Each Disbursement this Period

1408.40

Full Name (Last, First, Middle Initial)

B. MERKLE INC

Mailing Address 100 JAMISON CT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SB21-0.036068

Amount of Each Disbursement this Period

25179.52

Full Name (Last, First, Middle Initial)

C. MERKLE INC

Mailing Address 100 JAMISON CT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036211

Amount of Each Disbursement this Period

20000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46587.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. MJO SERVICES

Mailing Address 1101 BUSINESS PARKWAY SOUTH

City WESTMINSTER State MD Zip Code 21157

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SB21-0.035958**

Amount of Each Disbursement this Period

2290.51

Full Name (Last, First, Middle Initial)

B. NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **SB21-0.036070**

Amount of Each Disbursement this Period

13948.98

Full Name (Last, First, Middle Initial)

C. NATIONAL RESEARCH INC

Mailing Address 146 STATE HIGHWAY 34
STE 250

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SB21-0.035960**

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26239.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. ONMESSAGE INC

Mailing Address 705 MELVIN DR
STE 105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2014

Transaction ID : SB21-0.036042

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. ONMESSAGE INC

Mailing Address 705 MELVIN DR
STE 105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SB21-0.036194

Amount of Each Disbursement this Period

7420.00

Full Name (Last, First, Middle Initial)

C. OXFORD COMMUNICATIONS LLC

Mailing Address PO BOX 1214

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SB21-0.035962

Amount of Each Disbursement this Period

62.83

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

22482.83

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PATTON BOGGS LLP

Mailing Address 2550 M ST NW

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036043**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND ST
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036480**

Amount of Each Disbursement this Period

3401.88

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 144 2ND ST
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21-0.036484**

Amount of Each Disbursement this Period

145.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8546.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. POLITICAL INK INC

Mailing Address 1220 19TH ST NW
STE 502

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035964

Amount of Each Disbursement this Period

5473.30

Full Name (Last, First, Middle Initial)

B. POLITICAL CAPITAL

Mailing Address 2668 SCOTT MILL LANE

City JACKSONVILLE State FL Zip Code 32223

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035966

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PREFERRED COMMUNICATIONS

Mailing Address 815 KING ST
STE 209

City ALEXANDRIA State VA Zip Code 22314-3099

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035968

Amount of Each Disbursement this Period

1830.53

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9803.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PRINTING EXPRESS

Mailing Address 21 WAREHOUSE RD

City HARRISONBURG State VA Zip Code 22801

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036044

Amount of Each Disbursement this Period

16661.42

Full Name (Last, First, Middle Initial)

B. PROGENT CORPORATION

Mailing Address PO BOX 254737

City SACRAMENTO State CA Zip Code 95865-4737

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035969

Amount of Each Disbursement this Period

99.17

Full Name (Last, First, Middle Initial)

C. QUENCH

Mailing Address 780 5TH AVE
STE 200

City KING OF PRUSSIA State PA Zip Code 19406

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035973

Amount of Each Disbursement this Period

475.88

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17236.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RAM PRODUCTION SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Mailing Address 5805 HALL ST

Transaction ID : SB21-0.036195

City State Zip Code
BURKE VA 22015

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
EQUIPMENT MAINTENANCE

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. RESPONSE AMERICA LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Mailing Address 1252 RAMBLING RILL CIR

Transaction ID : SB21-0.036196

City State Zip Code
STATHAM GA 30666

Amount of Each Disbursement this Period

68348.76

Purpose of Disbursement
FINANCE CONSULTING

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. SCOTT PRENN LLP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Mailing Address BOX 590
28 OLD BROMPTON RD

Transaction ID : SB21-0.036227

City State Zip Code
LONDON UK SW73S

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
FINANCE CONSULTING

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

73548.76

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST PUBLISHING AND MAILING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address 2600 NW TOPEKA BLVD

Transaction ID : SB21-0.035981

City TOPEKA State KS Zip Code 66617

Amount of Each Disbursement this Period

41407.68

Purpose of Disbursement
POSTAGE

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. SOUTHWEST PUBLISHING AND MAILING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Mailing Address 2600 NW TOPEKA BLVD

Transaction ID : SB21-0.036197

City TOPEKA State KS Zip Code 66617

Amount of Each Disbursement this Period

22879.39

Purpose of Disbursement
PRINTING

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. SRQ SERVICES TRANSPORTATION & DMC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Mailing Address 727 CATTLEMAN ROAD

Transaction ID : SB21-0.036198

City SARASOTA State FL Zip Code 34232

Amount of Each Disbursement this Period

3225.00

Purpose of Disbursement
TRAVEL

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

67512.07

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. STARBOARD GROUP

Mailing Address 7720 EAST BELLEVIEW AVE
STE B-325

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035983

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. STRATEGIC ADVANCE SERVICES LLC

Mailing Address 611 PENNSYLVANIA AVE SE
STE 267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL RESERVATION/BOOKING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035979

Amount of Each Disbursement this Period

12333.60

Full Name (Last, First, Middle Initial)

C. STRATEGIC MARKETING AND MAILING

Mailing Address 3002 N APOLLO DRIVE

City CHAMPAIGN State IL Zip Code 61822

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036086

Amount of Each Disbursement this Period

35681.69

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50515.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRATEGIC FUNDRAISING INC

Mailing Address 2625 MOMENTUM PL

City CHICAGO State IL Zip Code 60689-5326

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036199

Amount of Each Disbursement this Period

225842.21

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21-0.036476

Amount of Each Disbursement this Period

4041.86

Full Name (Last, First, Middle Initial)

C. SUSAN GAGE CATERERS

Mailing Address 7411 LIVINGSTON RD

City OXON HILL State MD Zip Code 20745

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
02 / 24 / 2014

Transaction ID : SB21-0.036215

Amount of Each Disbursement this Period

352.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

230236.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. SUSAN LILLY & COMPANY

Mailing Address 1005 CONGRESS AVE
SUITE 910

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036031**

Amount of Each Disbursement this Period

1900.99

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX ST
STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : **SB21-0.036045**

Amount of Each Disbursement this Period

47903.93

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX ST
STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2014

Transaction ID : **SB21-0.036222**

Amount of Each Disbursement this Period

100000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

149804.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE CATALYST GROUP

Mailing Address 600 PENNSYLVANIA AVE SE
STE 330

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : **SB21-0.035928**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. THE COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : **SB21-0.035938**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. THE RONALD REAGAN PRESIDENTIAL FOUNDATION

Mailing Address 40 PRESIDENTIAL DR
STE 200

City SIMI VALLEY State CA Zip Code 93065

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : **SB21-0.035975**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE ROTHENBERG POLITICAL REPORT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address 77 K ST NE
7TH FLOOR

Transaction ID : SB21-0.035977

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

249.00

Purpose of Disbursement
SUBSCRIPTIONS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. THE TARRANCE GROUP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address 201 N UNION ST
STE 410

Transaction ID : SB21-0.035985

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

37495.00

Purpose of Disbursement
SURVEY RESEARCH

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. THE TARRANCE GROUP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Mailing Address 201 N UNION ST
STE 410

Transaction ID : SB21-0.036046

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

10974.00

Purpose of Disbursement
SURVEY RESEARCH

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

48718.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. TRANSAMERICA RETIREMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Mailing Address PO BOX 30368

Transaction ID : SB21-0.036187

City State Zip Code
LOS ANGELES CA 90099-9208

Amount of Each Disbursement this Period

28841.83

Purpose of Disbursement
RETIREMENT SERVICES

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. TRANSAMERICA RETIREMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Mailing Address PO BOX 30368

Transaction ID : SB21-0.036339

City State Zip Code
LOS ANGELES CA 90099-9208

Amount of Each Disbursement this Period

28373.49

Purpose of Disbursement
RETIREMENT SERVICES

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. TVEYES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address 2150 POST ROAD

Transaction ID : SB21-0.035987

City State Zip Code
FAIRFIELD CT 06824

Amount of Each Disbursement this Period

5400.00

Purpose of Disbursement
SUBSCRIPTIONS

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

62615.32

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. UNITED HEALTHCARE

Mailing Address DEPARTMENT CH 10151

City PALATINE State IL Zip Code 60055-0151

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036226

Amount of Each Disbursement this Period

48739.66

Category/
Type

Full Name (Last, First, Middle Initial)

B. UPS DC

Mailing Address 316 PENNSYLVANIA AVE SE
SUITE 300

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036216

Amount of Each Disbursement this Period

200.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. UPS STORE

Mailing Address 611 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003-4303

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036074

Amount of Each Disbursement this Period

1152.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50091.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : **SB21-0.036185**

Amount of Each Disbursement this Period

88231.18

Full Name (Last, First, Middle Initial)

B. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : **SB21-0.036329**

Amount of Each Disbursement this Period

87860.31

Full Name (Last, First, Middle Initial)

C. US POSTMASTER

Mailing Address 900 BRENTWOOD ROAD NE

City WASHINGTON State DC Zip Code 20018-1004

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 03 / 2014

Transaction ID : **SB21-0.035807**

Amount of Each Disbursement this Period

40000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

216091.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. US POSTMASTER

Mailing Address 900 BRENTWOOD ROAD NE

City WASHINGTON State DC Zip Code 20018-1004

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SB21-0.035999

Amount of Each Disbursement this Period

80000.00

Full Name (Last, First, Middle Initial)

B. US POSTMASTER

Mailing Address 900 BRENTWOOD ROAD NE

City WASHINGTON State DC Zip Code 20018-1004

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SB21-0.036200

Amount of Each Disbursement this Period

15164.40

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address PO BOX 660720

City DALLAS State TX Zip Code 75266-0720

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

Transaction ID : SB21-0.036201

Amount of Each Disbursement this Period

242.41

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95406.81

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1411

City RICHMOND State VA Zip Code 23212

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036186

Amount of Each Disbursement this Period

5810.92

B. VIRGINIA DEPT OF TAXATION

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1411

City RICHMOND State VA Zip Code 23212

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB21-0.036327

Amount of Each Disbursement this Period

5565.18

C. VISUAL IMPACT DESIGN

Full Name (Last, First, Middle Initial)

Mailing Address 1252 RAMBLING RILL CR

City STATHAM State GA Zip Code 30666

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SB21-0.036217

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11676.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK NA

Mailing Address 1753 PINNACLE DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21-0.036076

Amount of Each Disbursement this Period

2874.32

Full Name (Last, First, Middle Initial)

B. WESTAR SATELLITE SERVICES

Mailing Address PO BOX 974375

City DALLAS State TX Zip Code 75397-4375

Purpose of Disbursement
SATELLITE TV SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21-0.036047

Amount of Each Disbursement this Period

15353.41

Full Name (Last, First, Middle Initial)

C. WILAND DIRECT

Mailing Address 6309 MONARCH PARK PLACE, STE 201

City LONGMONT State CO Zip Code 80503

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21-0.035989

Amount of Each Disbursement this Period

33229.29

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51457.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. WILSON PERKINS ALLEN OPINION RESEARCH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address 1319 CLASSEN DRIVE

Transaction ID : SB21-0.035991

City State Zip Code
OKLAHOMA CITY OK 73103

Amount of Each Disbursement this Period

11680.00

Purpose of Disbursement
SURVEY RESEARCH

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. VOTESANE PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Mailing Address PO BOX 2713

Transaction ID : SB21-0.036474

City State Zip Code
ALEXANDRIA VA 22301

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
CONDUIT DISTRIBUTION FEES

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. VOTESANE PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Mailing Address PO BOX 2713

Transaction ID : SB21-0.036478

City State Zip Code
ALEXANDRIA VA 22301

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
CONDUIT DISTRIBUTION FEES

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12105.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. VOTESANE PAC

Mailing Address PO BOX 2713

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
CONDUIT DISTRIBUTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2014

Transaction ID : SB21-0.036482

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

B. VOTESANE PAC

Mailing Address PO BOX 2713

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
CONDUIT DISTRIBUTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	18	/	2014

Transaction ID : SB21-0.036486

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

775.00

2762056.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. NEW YORK REPUBLICAN STATE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Mailing Address 315 STATE ST

Transaction ID : SB22-0.035908

City ALBANY State NY Zip Code 12210

Amount of Each Disbursement this Period

50000.00

Purpose of Disbursement
TRANSFER

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF FLORIDA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2014

Mailing Address PO BOX 311

Transaction ID : SB22-0.035910

City TALLAHASSEE State FL Zip Code 32302

Amount of Each Disbursement this Period

20000.00

Purpose of Disbursement
TRANSFER

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF FLORIDA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Mailing Address PO BOX 311

Transaction ID : SB22-0.035918

City TALLAHASSEE State FL Zip Code 32302

Amount of Each Disbursement this Period

60000.00

Purpose of Disbursement
TRANSFER

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

130000.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E JEFFERSON

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB22-0.036013

Amount of Each Disbursement this Period

35000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

35000.00

165000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. LINDA MCMAHON

Mailing Address 14 HURLINGHAM DR

City GREENWICH State CT Zip Code 06831-2739

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SB28A-0.036039

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	4

Transaction ID : **SB29-0.0866669**

Amount of Each Disbursement this Period

6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. WOUNDED WARRIOR PROJECT

Mailing Address 1120 G ST NW
STE 700

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	4

Transaction ID : **SB29-0.039098**

Amount of Each Disbursement this Period

6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DR
SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
RECOUNT - LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	1	4

Transaction ID : **SB29-0.036078**

Amount of Each Disbursement this Period

2	9	2	5	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3	5	2	5	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

3	5	2	5	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE** Transaction ID : **SCHEDC_1**

LOAN SOURCE Full Name (Last, First, Middle Initial) WELLS FARGO	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1753 PINNACLE DRIVE	
City MCLEAN State VA ZIP Code 22102	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
0.00	0.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 01 / 2013	08 / 31 / 2014	1.75 % (apr)	<input checked="" type="checkbox"/> Yes <input 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)..... ▶	0.00
TOTALS This Period (last page in this line only)..... ▶	0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address PO BOX 16504	Amount 27568.64
City State Zip Code ALEXANDRIA VA 22302	Transaction ID : SE24-0.038830 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 11 / 2014
Purpose of Expenditure MEDIA	Category/Type
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL GENERAL

Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address PO BOX 16504	Amount 58033.92
City State Zip Code ALEXANDRIA VA 22302	Transaction ID : SE24-0.038755 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 04 / 2014
Purpose of Expenditure MEDIA	Category/Type
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	85602.56
(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.

Signature Keith A Davis [Electronically Filed] Date 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
FEC IDENTIFICATION NUMBER C C00075820
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee FP1 STRATEGIES LLC
Mailing Address PO BOX 16504
City ALEXANDRIA State VA Zip Code 22302
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate ALEX SINK Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 13540.00
Transaction ID : SE24-0.038863
Date of Disbursement or Obligation 02 / 12 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

Full Name of Payee FP1 STRATEGIES LLC
Mailing Address PO BOX 16504
City ALEXANDRIA State VA Zip Code 22302
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate ALEX SINK Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 27592.40
Transaction ID : SE24-0.038874
Date of Disbursement or Obligation 02 / 18 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures 41132.40
(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.
Keith A Davis [Electronically Filed] Date 03 / 17 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>		

Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO BOX 16504	Amount <input type="text"/> 6430.00
City ALEXANDRIA	State VA
Zip Code 22302	Transaction ID : SE24-0.038952
Purpose of Expenditure MEDIA	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type <input type="text"/>	<input type="text"/> 02 / <input type="text"/> 21 / <input type="text"/> 2014
Name of Federal Candidate DAVID W JOLLY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	<input checked="" type="checkbox"/> House District: <u>13</u> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL

Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO BOX 16504	Amount <input type="text"/> 6430.00
City ALEXANDRIA	State VA
Zip Code 22302	Transaction ID : SE24-0.038951
Purpose of Expenditure MEDIA	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type <input type="text"/>	<input type="text"/> 02 / <input type="text"/> 21 / <input type="text"/> 2014
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	<input checked="" type="checkbox"/> House District: <u>13</u> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures.....	<input type="text"/> 12860.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures.....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Keith A Davis [Electronically Filed] Date 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee FP1 STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address PO BOX 16504		Amount 13794.96
City ALEXANDRIA	State VA	Zip Code 22302
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24-0.038970 Date of Disbursement or Obligation MM / DD / YYYY 02 / 25 / 2014
Name of Federal Candidate DAVID W JOLLY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

Full Name of Payee FP1 STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address PO BOX 16504		Amount 13794.96
City ALEXANDRIA	State VA	Zip Code 22302
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24-0.038971 Date of Disbursement or Obligation MM / DD / YYYY 02 / 25 / 2014
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	27589.92
(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.

Signature Keith A Davis [Electronically Filed] Date MM / DD / YYYY 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee GS STRATEGY GROUP	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 350 N 9TH ST SUITE 550	Amount 20900.00
City State Zip Code BOISE ID 83702	Transaction ID : SE24-0.038756 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 04 / 2014
Purpose of Expenditure SURVEY RESEARCH	Category/Type
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

Full Name of Payee GS STRATEGY GROUP	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 350 N 9TH ST SUITE 550	Amount 17500.00
City State Zip Code BOISE ID 83702	Transaction ID : SE24-0.038870 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 18 / 2014
Purpose of Expenditure SURVEY RESEARCH	Category/Type
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	38400.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
FEC IDENTIFICATION NUMBER C C00075820
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee GS STRATEGY GROUP
Mailing Address 350 N 9TH ST SUITE 550
City BOISE State ID Zip Code 83702
Purpose of Expenditure SURVEY RESEARCH
Name of Federal Candidate ALEX SINK
Calendar Year-To-Date Per Election for Office Sought 1966311.56
Date of Public Distribution/Dissemination
Amount 17500.00
Transaction ID : SE24-0.039124
Date of Disbursement or Obligation 02 / 26 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA
Name of Federal Candidate ALEX SINK
Calendar Year-To-Date Per Election for Office Sought 1966311.56
Date of Public Distribution/Dissemination
Amount 216514.56
Transaction ID : SE24-0.038750
Date of Disbursement or Obligation 02 / 03 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures 234014.56
(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.
Keith A Davis [Electronically Filed] Date 03 / 17 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 SLATERS LANE		Amount <input type="text"/> 303327.04
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type <input type="text"/>	Transaction ID : SE24-0.038827 Date of Disbursement or Obligation <input type="text"/> 02 / <input type="text"/> 10 / <input type="text"/> 2014
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 SLATERS LANE		Amount <input type="text"/> 303588.40
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type <input type="text"/>	Transaction ID : SE24-0.038869 Date of Disbursement or Obligation <input type="text"/> 02 / <input type="text"/> 18 / <input type="text"/> 2014
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL GENERAL</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....	<input type="text"/> 606915.44
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures.....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Keith A Davis [Electronically Filed] Date 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
FEC IDENTIFICATION NUMBER C C00075820
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate ALEX SINK Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 151780.56
Transaction ID : SE24-0.038969
Date of Disbursement or Obligation 02 / 24 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate DAVID W JOLLY Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 151780.56
Transaction ID : SE24-0.038968
Date of Disbursement or Obligation 02 / 24 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures 303561.12
(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.

Signature Keith A Davis [Electronically Filed] Date 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
FEC IDENTIFICATION NUMBER C C00075820
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee TARGETED VICTORY
Mailing Address 1033 N FAIRFAX ST STE 400
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate ALEX SINK Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 34990.00
Transaction ID : SE24-0.038826
Date of Disbursement or Obligation 02 / 10 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

Full Name of Payee TARGETED VICTORY
Mailing Address 1033 N FAIRFAX ST STE 400
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type
Name of Federal Candidate ALEX SINK Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1966311.56

Date of Public Distribution/Dissemination
Amount 12000.00
Transaction ID : SE24-0.038871
Date of Disbursement or Obligation 02 / 18 / 2014
Office Sought: House District: 13 State: FL
Disbursement For: Other (specify) SPECIAL GENERAL

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 46990.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Keith A Davis Date 03 / 17 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee TARGETED VICTORY	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 1033 N FAIRFAX ST STE 400	Amount 25000.00
City State Zip Code ALEXANDRIA VA 22314	Transaction ID : SE24-0.039123 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2014
Purpose of Expenditure MEDIA	Category/Type
Name of Federal Candidate ALEX SINK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 1966311.56	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► SPECIAL GENERAL

Full Name of Payee	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	1422066.00

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.

Keith A Davis
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
03 / 17 / 2014