

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

Committee on Arrangements for the 2016 Republican National Convention

ADDRESS (number and street) 310 First Street SE

Check if different than previously reported. (ACC)

Washington DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00578419

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 M M / D D / Y Y Y Y Y Y in the State of

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 29 / 2016 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2016

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

Parker, Anthony, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Parker, Anthony, , ,* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 30 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Committee on Arrangements for the 2016 Republican National Convention

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="2016"/>	<input type="text" value="401164.76"/>	<input type="text" value="401164.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="956148.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="396.35"/>	<input type="text" value="11531945.72"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="956544.50"/>	<input type="text" value="11933110.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="254646.58"/>	<input type="text" value="11231212.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="701897.92"/>	<input type="text" value="701897.92"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Committee on Arrangements for the 2016 Republican National Convention

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	10920095.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	199.72	609292.03
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	196.63	2558.69
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)).....▶	396.35	11531945.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	396.35	11531945.72

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	254646.58	11231212.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	254646.58	11231212.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	254646.58	11231212.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	254646.58	11231212.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	254646.58	11231212.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	199.72	609292.03
38. Net Operating Expenditures (subtract Line 37 from Line 36)	254446.86	10621920.53

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Committee on Arrangements for the 2016 Republican National Convention

A. Key Bank

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

Mailing Address 800 Superior Av E

City Cleveland	State OH	Zip Code 44114
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2561.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		29		2016

Transaction ID : SA15.8758

Amount of Each Receipt this Period
199.72

Memo Item
refund of bank fees

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	199.72
TOTAL This Period (last page this line number only).....	199.72

**SCHEDULE A (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 18
<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)
Committee on Arrangements for the 2016 Republican National Convention

A. AT&T

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

Mailing Address 208 S. Akard St.

City Dallas	State TX	Zip Code 75202
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

Transaction ID : SA17.8707

Amount of Each Receipt this Period

0.00

Memo Item
 Goods and services provided in exchange for promotional consideration pursuant to 11 CFR 9008.9(b)

B. Delta Airlines

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

Mailing Address P.O. Box 20706

City Atlanta	State GA	Zip Code 30320
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

Transaction ID : SA17.8708

Amount of Each Receipt this Period

0.00

Memo Item
 Goods and services provided in exchange for promotional consideration pursuant to 11 CFR 9008.9(b)

C. Key Bank

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

Mailing Address 800 Superior Av E

City Cleveland	State OH	Zip Code 44114
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

2639.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : SA17.8757

Amount of Each Receipt this Period

77.64

Memo Item
 interest

SUBTOTAL of Receipts This Page (optional).....	77.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 18
<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)
Committee on Arrangements for the 2016 Republican National Convention

A. Key Bank

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

Mailing Address 800 Superior Av E

City Cleveland	State OH	Zip Code 44114
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2758.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : SA17.8756

Amount of Each Receipt this Period
118.99

Memo Item

B. Microsoft Corporation

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

Mailing Address One Microsoft Way

City Redmond	State WA	Zip Code 98052
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2016

Transaction ID : SA17.8709

Amount of Each Receipt this Period
0.00

Memo Item
 Goods and services provided in exchange for promotional consideration pursuant to 11 CFR 9008.9(b)

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.99
TOTAL This Period (last page this line number only).....	196.63

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. ADP, LLC

Mailing Address 1851 N Resler Drive MS- 100

City El Paso State TX Zip Code 79912

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
11 / 30 / 2016

FEC Identification Number

C []

Transaction ID : SB21B.8718

Amount of Each Disbursement this Period

[] 4892.40

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP, LLC

Mailing Address 1851 N Resler Drive MS- 100

City El Paso State TX Zip Code 79912

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
12 / 15 / 2016

FEC Identification Number

C []

Transaction ID : SB21B.8721

Amount of Each Disbursement this Period

[] 4115.72

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP, LLC

Mailing Address 1851 N Resler Drive MS- 100

City El Paso State TX Zip Code 79912

Purpose of Disbursement payroll expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2016

FEC Identification Number

C []

Transaction ID : SB21B.8751

Amount of Each Disbursement this Period

[] 29.61

Memo Item

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

[] 9037.73

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. ADP, LLC

Mailing Address 1851 N Resler Drive MS- 100

City El Paso State TX Zip Code 79912

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
12 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8738
Amount of Each Disbursement this Period
1929.08

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP, LLC

Mailing Address 1851 N Resler Drive MS- 100

City El Paso State TX Zip Code 79912

Purpose of Disbursement payroll expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8752
Amount of Each Disbursement this Period
22.93

Memo Item

Full Name (Last, First, Middle Initial)

C. Bresso, Gineen, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8715
Amount of Each Disbursement this Period
4949.39

Memo Item

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

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

6901.40

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Bresso, Gineen, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8716
Amount of Each Disbursement this Period
4949.39

Memo Item

Full Name (Last, First, Middle Initial)

B. Bresso, Gineen, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8717
Amount of Each Disbursement this Period
4949.39

Memo Item

Full Name (Last, First, Middle Initial)

C. City of Cleveland

Mailing Address 500 Lakeside Av

City Cleveland State OH Zip Code 44114

Purpose of Disbursement parking

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8712
Amount of Each Disbursement this Period
15350.00

Memo Item

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

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

25248.78

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Davidson, Caroline, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City
Cleveland

State
OH

Zip Code
44115

Purpose of Disbursement
contract services - printing

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
12			13			2016			

FEC Identification Number

C []

Transaction ID : SB21B.8739

Amount of Each Disbursement this Period

[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Freeman

Mailing Address PO Box 650036

City
Dallas

State
TX

Zip Code
75265

Purpose of Disbursement
Contract services - construction

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
12			29			2016			

FEC Identification Number

C []

Transaction ID : SB21B.8710

Amount of Each Disbursement this Period

[] 170258.23

Memo Item

Full Name (Last, First, Middle Initial)

C. Key Bank Mastercard

Mailing Address P.O. Box 89446

City
Cleveland

State
OH

Zip Code
44101

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	/	D	D	/	Y	Y	Y	Y
12			07			2016			

FEC Identification Number

C []

Transaction ID : SB21B.8722

Amount of Each Disbursement this Period

[] 3922.21

Memo Item

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

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

[] 175180.44

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Forth Worth State TX Zip Code 76155

Purpose of Disbursement
airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8722.4
Amount of Each Disbursement this Period
812.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Trump Hotel

Mailing Address 1100 Pennsylvania Av NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
meeting expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8722.4
Amount of Each Disbursement this Period
281.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Hotel Monteleone

Mailing Address 214 Royal St

City New Orleans State LA Zip Code 70130

Purpose of Disbursement
hotel lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8722.
Amount of Each Disbursement this Period
2345.34

Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial) A. Egencia LLC		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016	
Mailing Address PO Box 847677		FEC Identification Number C	
City Dallas	State TX	Zip Code 75284	Transaction ID : SB21B.8722.4 Amount of Each Disbursement this Period 91.00
Purpose of Disbursement travel booking expense		<input type="checkbox"/> Memo Item	
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. Knapp, Kimberly, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1228 Euclid Ave 4th Floor		FEC Identification Number C	
City Cleveland	State OH	Zip Code 44115	Transaction ID : SB21B.8737 Amount of Each Disbursement this Period 2535.64
Purpose of Disbursement payroll		<input type="checkbox"/> Memo Item	
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. Larson, Jeff, , ,		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 1228 Euclid Ave 4th Floor		FEC Identification Number C	
City Cleveland	State OH	Zip Code 44115	Transaction ID : SB21B.8711 Amount of Each Disbursement this Period 16000.00
Purpose of Disbursement contract services- management		<input type="checkbox"/> Memo Item	
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).....	18535.64
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Nord, Alexis, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8748
Amount of Each Disbursement this Period
949.26

Memo Item

Full Name (Last, First, Middle Initial)

B. Nord, Alexis, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8749
Amount of Each Disbursement this Period
949.27

Memo Item

Full Name (Last, First, Middle Initial)

C. Nord, Alexis, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8750
Amount of Each Disbursement this Period
949.26

Memo Item

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

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

2847.79

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Sumrall, Jan, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8719
Amount of Each Disbursement this Period
4407.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Sumrall, Jan, , ,

Mailing Address 1228 Euclid Ave
4th Floor

City Cleveland State OH Zip Code 44115

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8720
Amount of Each Disbursement this Period
4407.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Ulilia Group

Mailing Address 14038 Rochelle Dr

City Maple Heights State OH Zip Code 44137

Purpose of Disbursement catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2016

FEC Identification Number

C
Transaction ID : SB21B.8754
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

9815.20

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Wiley Rein

Mailing Address 1776 K St NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
contract services- legal and travel

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
12 / 13 / 2016

FEC Identification Number

C

Transaction ID : SB21B.8714
Amount of Each Disbursement this Period

7079.60

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

7079.60

254646.58

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 18
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Committee on Arrangements for the 2016 Republican National Convention

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ulilia Group			Nature of Debt (Purpose): catering
Mailing Address 14038 Rochelle Dr			
City Maple Heights	State OH	Zip Code 44137	

Outstanding Balance Beginning This Period		Transaction ID : SD10.8702	
1000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1000.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	