

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 North Dakota Republican Party

ADDRESS (number and street) 1029 N. 5th Street Bismarck ND 58501

2. FEC IDENTIFICATION NUMBER C C00018929 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06 / 01 / 2018 through 06 / 30 / 2018

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

Signature of Treasurer Hacker, Nicholas, , , [Electronically Filed] Date 11 / 19 / 2018

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

North Dakota Republican Party

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="5394.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80187.46"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="68161.40"/>	<input type="text" value="456052.28"/>
(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="148348.86"/>	<input type="text" value="461446.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="63848.14"/>	<input type="text" value="376945.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="84500.72"/>	<input type="text" value="84500.72"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="4074.10"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

North Dakota Republican Party

Report Covering the Period: From: 06 / 01 / 2018 To: 06 / 30 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16565.00	105146.27
(ii) Unitemized .....	8395.00	136534.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24960.00	241680.58
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	24960.00	246680.58
12. Transfers From Affiliated/Other Party Committees.....	42500.00	160883.94
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).....	351.40	660.85
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	350.00	2800.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	45026.91
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	45026.91
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	68161.40	456052.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	68161.40	411025.37

**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 .....	838.69	12807.89
(ii) Non-Federal Share.....	3155.04	48181.91
(b) Other Federal Operating Expenditures .....	36726.86	128965.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	40720.59	189955.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	75.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditures (use Schedule E) .....	380.00	70228.05
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	609.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	609.50
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	22747.55	106078.08
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	22747.55	106078.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	63848.14	376945.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60693.10	328763.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24960.00	246680.58
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	609.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24960.00	246071.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	37565.55	141773.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	351.40	660.85
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	37214.15	141112.32

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

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

FOR LINE NUMBER: PAGE 6 OF 44  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. BAVENDICK, JOANNE, C., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1234 W HIGHLAND ACRES RD  
 City BISMARCK State ND Zip Code 58501-1259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 14 / 2018  
**Transaction ID : SA11A.40568**  
 Amount of Each Receipt this Period 350.00  
 Memo Item CONTRIBUTION

**B. BERG, RICK, , REP.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6437 13TH ST N  
 City FARGO State ND Zip Code 58102-6012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIDWEST MANAGEMENT Occupation (for Individual) COMMERCIAL REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1036.50

Date of Receipt 06 / 20 / 2018  
**Transaction ID : SA11A.41156**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. BOEHLER, SANDY, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1721 E ROSE CREEK PKWY S  
 City FARGO State ND Zip Code 58104-6834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASB INC. Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 12 / 2018  
**Transaction ID : SA11A.1547**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item 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: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. BUTLER, DAN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 BRIARWOOD PL  
 City FARGO State ND Zip Code 58104-7308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BUTLER MACHINERY Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2018  
**Transaction ID : SA11A.41533**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**B. EMINETH, ALVIN, T., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3406 DOMINION ST. APT. 203  
 City BISMARCK State ND Zip Code 58503-5517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EMINETH AND ASSOCIATES Occupation (for Individual) COURT REPORTING SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 18 / 2018  
**Transaction ID : SA11A.40743**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**C. EVITT, R.D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1291  
 City WILLISTON State ND Zip Code 58802-1291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 01 / 2018  
**Transaction ID : SA11A.40168**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 44  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FOLKVORD, PATRICIA, , ,**

Mailing Address 16292 1ST ST SW

City SIDNEY   State MT   Zip Code 59270-9023

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2018

**Transaction ID : SA11A.41535**

Amount of Each Receipt this Period  
125.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HAMANN, JAY, R., MR.,**

Mailing Address 558 PINEHURST AVE

City GREEN BAY   State WI   Zip Code 54302-4212

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2018

**Transaction ID : SA11A.41230**

Amount of Each Receipt this Period  
145.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KADRMAS, BEVERLY, , MS.,**

Mailing Address 120 2ND ST SE

City DICKINSON   State ND   Zip Code 58601-5627

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

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

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2018

**Transaction ID : SA11A.41406**

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. KELLY, NANCY, A.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3335 1ST ST E  
 City WEST FARGO State ND Zip Code 58078-7962  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LABOR MASTERS EMPLOYMENT SVC. Occupation (for Individual) SALESPERSON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 17 / 2018  
**Transaction ID : SA11A.41297**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. KRIEG, GUY, R., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 408  
 City FARGO State ND Zip Code 58107-0408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 06 / 08 / 2018  
**Transaction ID : SA11A.40862**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**C. LONG, JONATHAN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 537 36TH AVE WEST  
 City WEST FARGO State ND Zip Code 58078-8196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BNSF RAILWAY Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 01 / 2018  
**Transaction ID : SA11A.40171**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 44  
(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)  
**North Dakota Republican Party**

**A. MILLER, BRADLEY, I., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 PROSPECT PT

City BISMARCK	State ND	Zip Code 58501-2473
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MILLER INSULATION	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2018

**Transaction ID : SA11A.39963**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. OFFUTT, RONALD, D., MR., JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 HARWOOD DR. S

City FARGO	State ND	Zip Code 58104-6229
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2018

**Transaction ID : SA11A.754**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 44

City RICHARDTON	State ND	Zip Code 58652-0044
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
251.50

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2018

**Transaction ID : SA11A.39997**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. ROBSON, DEWEY, B., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 HARWOOD DR. S. APT. 217  
 City FARGO State ND Zip Code 58104-6292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 06 / 2018  
**Transaction ID : SA11A.41405**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**B. SKARPHOL, CARL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 10TH ST W  
 City BOTTINEAU State ND Zip Code 58318-1633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt 06 / 07 / 2018  
**Transaction ID : SA11A.41233**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. UNNIKRISSHANN, MADHU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 27TH AVE. NW  
 City MINOT State ND Zip Code 58703-0855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRINITY HEALTH Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 09 / 2018  
**Transaction ID : SA11A.757**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number 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 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. UTTER, RAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3061 SAND HILL RD.  
 City BISMARCK State ND Zip Code 58503-6437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.50

Date of Receipt 06 / 19 / 2018  
**Transaction ID : SA11A.41321**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. WALTH, CURTIS, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3040 TYLER PKWY  
 City BISMARCK State ND Zip Code 58503-0182  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIRST SOUTHWEST BANK Occupation (for Individual) BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11A.39962**  
 Amount of Each Receipt this Period 120.00  
 Memo Item CONTRIBUTION

**C. WISDOM , DAVID , L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3290 42ND ST  
 City MANDAN State ND Zip Code 58554-8327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 07 / 2018  
**Transaction ID : SA11A.41231**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16565.00

**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 13 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. NRSC**

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

Mailing Address 425 2ND ST NE

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
65200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2018

**Transaction ID : SA12.1122**

Amount of Each Receipt this Period  
4200.00

Memo Item  
TRANSFER

**B. REPUBLICAN NATIONAL COMMITTEE**

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

Mailing Address 301 1ST ST SE

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2018

**Transaction ID : SA12.1102**

Amount of Each Receipt this Period  
15500.00

Memo Item  
TRANSFER

**C. REPUBLICAN NATIONAL COMMITTEE**

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

Mailing Address 301 1ST ST SE

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
81500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2018

**Transaction ID : SA12.1103**

Amount of Each Receipt this Period  
22800.00

Memo Item  
TRANSFER

<b>SUBTOTAL</b> of Receipts This Page (optional).....	42500.00
<b>TOTAL</b> This Period (last page this line number only).....	42500.00

**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 44  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**HACKER, NICHOLAS, P., MR.,**

Mailing Address 4905 SOUTH BAY DR. SE

City MANDAN State ND Zip Code 58554-4747

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

Name of Employer (for Individual) ND GUARANTEE & TITLE COMPANY Occupation (for Individual) EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 671.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2018

**Transaction ID : SA15.247**

Amount of Each Receipt this Period  
 351.40

Memo Item  
 Reimbursement for Hotel Room

**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 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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.40
<b>TOTAL</b> This Period (last page this line number only).....▶	351.40

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

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. DAKOTA PAC**

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

Mailing Address P.O. BOX 3206

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
696.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2018

**Transaction ID : SA17.123**

Amount of Each Receipt this Period  
116.00

Memo Item  
RENT

**B. HOEVEN FOR SENATE**

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

Mailing Address P.O. BOX 861

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1404.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2018

**Transaction ID : SA17.211**

Amount of Each Receipt this Period  
234.00

Memo Item  
RENT

**C.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Rambough, Janean, M, Ms.,**

Mailing Address 2103 Assumption Drive

City Bismarck State ND Zip Code 58501

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 207642**

Amount of Each Disbursement this Period

[ ] 1701.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. Schefter, Dawson, , ,**

Mailing Address 5000 28th Ave. S. Apt. 304

City Fargo State ND Zip Code 58103

Purpose of Disbursement Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 207611**

Amount of Each Disbursement this Period

[ ] 643.27

Memo Item

Full Name (Last, First, Middle Initial)

**C. Schefter, Dawson, , ,**

Mailing Address 5000 28th Ave. S. Apt. 304

City Fargo State ND Zip Code 58103

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 207644**

Amount of Each Disbursement this Period

[ ] 1658.94

Memo Item

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

[ ] 4003.68

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

[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Credit card Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2018

FEC Identification Number

C [ ]

Transaction ID : 207636

Amount of Each Disbursement this Period

[ ] 247.92

Memo Item

Full Name (Last, First, Middle Initial)

**B. BNC Cardmember Services**

Mailing Address PO Box 790408

City St Louis State MO Zip Code 63179

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2018

FEC Identification Number

C [ ]

Transaction ID : 0207614-0003

Amount of Each Disbursement this Period

[ ] 19.00

MEMO

Memo Item

Full Name (Last, First, Middle Initial)

**C. BNC Cardmember Services**

Mailing Address PO Box 790408

City St Louis State MO Zip Code 63179

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C [ ]

Transaction ID : 0207614-000

Amount of Each Disbursement this Period

[ ] 2.00

MEMO

Memo Item

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

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

[ ] 247.92

[ ]

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

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NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. BNC Cardmember Services**

Mailing Address PO Box 790408

City  
St Louis

State  
MO

Zip Code  
63179

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 207614**

Amount of Each Disbursement this Period

[REDACTED] 57.29

ITEMIZATION BELOW

Memo Item

Full Name (Last, First, Middle Initial)

**B. Buzz360, LLC**

Mailing Address 1406 W Lake #201

City  
Minneapolis

State  
MN

Zip Code  
55408

Purpose of Disbursement  
Internet Service/Web Page

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 207658**

Amount of Each Disbursement this Period

[REDACTED] 350.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Canad Inn - Grand Forks**

Mailing Address 1000 S 42nd St

City  
Grand Forks

State  
ND

Zip Code  
58201

Purpose of Disbursement  
Staff/Travel-Expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : 0207625-000**

Amount of Each Disbursement this Period

[REDACTED] 4612.73

MEMO

Memo Item

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

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

[REDACTED] 407.29

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. City of Bismarck- Water Department**

Mailing Address PO Box 5503

City  
Bismarck

State  
ND

Zip Code  
58506

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : 207616**

Amount of Each Disbursement this Period

[ ] 54.03 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. Clockwork Systems**

Mailing Address 6001 Gloster Rd

City  
Bethesda

State  
MD

Zip Code  
20816

Purpose of Disbursement  
List Development/Acquisition

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : 207617**

Amount of Each Disbursement this Period

[ ] 450.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. DFI AS, LLC**

Mailing Address 210 Broadway N Ste 300

City  
 Fargo

State  
ND

Zip Code  
58102

Purpose of Disbursement  
Facility Rental Expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : 207629**

Amount of Each Disbursement this Period

[ ] 8600.00 [ ]

Memo Item

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

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

[ ] 9104.03 [ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 156 University Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-0015  
Amount of Each Disbursement this Period  
5.82

Memo Item MEMO

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 156 University Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-0016  
Amount of Each Disbursement this Period  
44.20

Memo Item MEMO

Full Name (Last, First, Middle Initial)

**C. Google.com**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Dues/Subscriptions

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-000;  
Amount of Each Disbursement this Period  
78.39

Memo Item MEMO

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Konica Minolta**

Mailing Address PO Box 660831

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Office Equipment Lease

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C  
**Transaction ID : 207619**  
Amount of Each Disbursement this Period  
536.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. LP Consulting**

Mailing Address 700 9th St S

City Fargo State ND Zip Code 58103

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

C  
**Transaction ID : 207632**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Max Properties, LLC**

Mailing Address 118 Belmont Rd

City Grand Forks State ND Zip Code 58201

Purpose of Disbursement  
Facility Rental Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2018

FEC Identification Number

C  
**Transaction ID : 207630**  
Amount of Each Disbursement this Period  
2400.00

Memo Item

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

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

7936.97

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Midcontinent Communications**

Mailing Address PO Box 5010

City: Sioux Falls  
State: SD  
Zip Code: 57117

Purpose of Disbursement  
Internet/Web Site

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2018

FEC Identification Number

C

Transaction ID : 207620

Amount of Each Disbursement this Period

660.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Montana-Dakota Utilities**

Mailing Address PO Box 1457

City: Bismarck  
State: ND  
Zip Code: 58502

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

FEC Identification Number

C

Transaction ID : 207613

Amount of Each Disbursement this Period

285.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Trail S

City: Rochester  
State: NY  
Zip Code: 14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2018

FEC Identification Number

C

Transaction ID : 207638

Amount of Each Disbursement this Period

1016.08

Memo Item

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

1961.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
06 / 29 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 207648**

Amount of Each Disbursement this Period

[ ] 1016.08

Memo Item

Full Name (Last, First, Middle Initial)

**B. Pinnacle List**

Mailing Address 2800 S Shirlington Rd Ste 970

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
List Development/Acquisition

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 207621**

Amount of Each Disbursement this Period

[ ] 484.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. Radisson Inn**

Mailing Address 800 S Third St

City Bismarck State ND Zip Code 58501

Purpose of Disbursement  
Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
05 / 22 / 2018

FEC Identification Number

C [ ]

**Transaction ID : 0207625-000**

Amount of Each Disbursement this Period

[ ] 108.41

MEMO

Memo Item

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

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

[ ] 1500.57

[ ]

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Radisson Inn**

Mailing Address 800 S Third St

City Bismarck State ND Zip Code 58501

Purpose of Disbursement  
Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-0008  
Amount of Each Disbursement this Period  
108.41

Memo Item

Full Name (Last, First, Middle Initial)

**B. Radisson Inn**

Mailing Address 800 S Third St

City Bismarck State ND Zip Code 58501

Purpose of Disbursement  
Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-0009  
Amount of Each Disbursement this Period  
108.41

Memo Item

Full Name (Last, First, Middle Initial)

**C. Radisson Inn**

Mailing Address 800 S Third St

City Bismarck State ND Zip Code 58501

Purpose of Disbursement  
Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2018

FEC Identification Number

C  
Transaction ID : 0207625-0011  
Amount of Each Disbursement this Period  
108.41

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. Radisson Inn**

Full Name (Last, First, Middle Initial)

Mailing Address 800 S Third St

City Bismarck State ND Zip Code 58501

Purpose of Disbursement Staff/Travel-Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2018

FEC Identification Number: C

Transaction ID : 0207625-0011

Amount of Each Disbursement this Period: 108.41

Memo Item

**B. Southwest Publishing & Mailing**

Full Name (Last, First, Middle Initial)

Mailing Address 2600 Nw Topeka Blvd

City Topeka State KS Zip Code 66617

Purpose of Disbursement Printing Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2018

FEC Identification Number: C

Transaction ID : 207622

Amount of Each Disbursement this Period: 3775.56

Memo Item

**C. Starion Financial**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 777

City Bismarck State ND Zip Code 58502

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2018

FEC Identification Number: C

Transaction ID : 207609

Amount of Each Disbursement this Period: 20.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3795.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Starion Financial**

Mailing Address PO Box 777

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2018

FEC Identification Number

C

**Transaction ID : 207610**

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Starion Financial**

Mailing Address PO Box 777

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2018

FEC Identification Number

C

**Transaction ID : 207631**

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Starion Financial**

Mailing Address PO Box 777

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2018

FEC Identification Number

C

**Transaction ID : 207637**

Amount of Each Disbursement this Period

49.95

Memo Item

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

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

89.95

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. Steve Brown Direct Mail Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3741 Southernwood Way

City San Diego State CA Zip Code 92106

Purpose of Disbursement Creative Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 12 / 2018

FEC Identification Number C

**Transaction ID : 207623**

Amount of Each Disbursement this Period 1100.46

Memo Item

**B. Stripe Payment System**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry Street Ste 550

City San Francisco State CA Zip Code 94102

Purpose of Disbursement Credit card Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 29 / 2018

FEC Identification Number C

**Transaction ID : 207635**

Amount of Each Disbursement this Period 3.98

Memo Item

**C. US Postmaster**

Full Name (Last, First, Middle Initial)

Mailing Address 220 E Rosser Ave

City Bismarck State ND Zip Code 58501

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 05 / 21 / 2018

FEC Identification Number C

**Transaction ID : 0207625-0001**

Amount of Each Disbursement this Period 24.70

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1104.44

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address 220 E Rosser Ave

City Bismarck State ND Zip Code 58501

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 207624

Amount of Each Disbursement this Period

[REDACTED] 394.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Visa Cardmember Service**

Mailing Address PO Box 790408

City St. Louis State MO Zip Code 63149

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 207625

Amount of Each Disbursement this Period

[REDACTED] 5560.31

ITEMIZATION BELOW

Memo Item

Full Name (Last, First, Middle Initial)

**C. Waste Management**

Mailing Address PO Box 4648

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 12 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 207627

Amount of Each Disbursement this Period

[REDACTED] 52.75

Memo Item

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

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

[REDACTED] 6007.06

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Wiland Direct, Inc.**

Mailing Address 6309 Monarch Park Pl , Ste 201

City Longmont State CO Zip Code 80503

Purpose of Disbursement  
Creative Design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2018

FEC Identification Number

C

**Transaction ID : 207628**

Amount of Each Disbursement this Period

500.03

Memo Item

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

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

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

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)..... ▶

500.03

36658.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial) <b>A. Einarson, Landen, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2018	
Mailing Address 907 Kittson Ave.		FEC Identification Number C [REDACTED] <b>Transaction ID : 207639</b> Amount of Each Disbursement this Period [REDACTED] 1041.56	
City Grafton	State ND	Zip Code 58237	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Einarson, Landen, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2018	
Mailing Address 907 Kittson Ave.		FEC Identification Number C [REDACTED] <b>Transaction ID : 207649</b> Amount of Each Disbursement this Period [REDACTED] 1041.57	
City Grafton	State ND	Zip Code 58237	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Kobus, Heather, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2018	
Mailing Address 595 Bayshore Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : 207640</b> Amount of Each Disbursement this Period [REDACTED] 1536.76	
City Ellenton	State FL	Zip Code 34222	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3619.89
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Kobus, Heather, , ,**

Mailing Address 595 Bayshore Dr

City Ellenton State FL Zip Code 34222

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207650**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Nunnenkamp, Philippe, G, ,**

Mailing Address 7785 Solitude CT

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207641**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nunnenkamp, Philippe, G, ,**

Mailing Address 7785 Solitude CT

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207651**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Schaubert, Taylor, , ,**

Mailing Address 515 Harvard St

City  
Grand Forks

State  
ND

Zip Code  
58203

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207643**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Schaubert, Taylor, , ,**

Mailing Address 515 Harvard St

City  
Grand Forks

State  
ND

Zip Code  
58203

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207653**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Spencer, Tyler, , ,**

Mailing Address 108 Killdeer Rd

City  
Webster

State  
MA

Zip Code  
01570

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207645**

Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

**A. Spencer, Tyler, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 108 Killdeer Rd

City Webster State MA Zip Code 01570

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 29 / 2018

FEC Identification Number C

**Transaction ID : 207655**

Amount of Each Disbursement this Period 1502.16

Memo Item

**B. Strinden, Jacob, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 245 Prairiewood Dr S

City Fargo State ND Zip Code 58103

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 15 / 2018

FEC Identification Number C

**Transaction ID : 207646**

Amount of Each Disbursement this Period 461.75

Memo Item

**C. Strinden, Jacob, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 245 Prairiewood Dr S

City Fargo State ND Zip Code 58103

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 29 / 2018

FEC Identification Number C

**Transaction ID : 207656**

Amount of Each Disbursement this Period 461.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2425.66

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Winbauer, Cole, , ,**

Mailing Address 3142 Morgan Circle

City  
Bismarck

State  
ND

Zip Code  
58503

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207647**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Winbauer, Cole, , ,**

Mailing Address 3142 Morgan Circle

City  
Bismarck

State  
ND

Zip Code  
58503

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207657**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Trail S

City  
Rochester

State  
NY

Zip Code  
14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 207776**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**North Dakota Republican Party**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Trail S

City  
Rochester

State  
NY

Zip Code  
14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2018

FEC Identification Number

C [ ]

**Transaction ID : 207777**

Amount of Each Disbursement this Period

[ ] 2779.48 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[ ]	/	[ ]	/	[ ]

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

Candidate Name

Office Sought:  House  
 Senate  
 President

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
[ ]	/	[ ]	/	[ ]

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)..... ▶

[ ] 2779.48 [ ]

[ ] 22747.55 [ ]

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 44
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Acuity Insurance Company</b>			Nature of Debt (Purpose): Insurance Expense (Insurance premiums 8/
Mailing Address PO Box 718			
City Sheboygan	State WI	Zip Code 53082-0718	

Outstanding Balance Beginning This Period <input type="text" value="2916.60"/>	<b>Transaction ID : 200944-109</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2916.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Facebook</b>			Nature of Debt (Purpose): Media/Advertising
Mailing Address 156 University Ave			
City Palo Alto	State CA	Zip Code 94304	

Outstanding Balance Beginning This Period <input type="text" value="125.00"/>	<b>Transaction ID : 207490-109</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="125.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period <input type="text" value="115.00"/>	<b>Transaction ID : 207511-109</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="115.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3031.60"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 37 OF 44
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period 230.00	Transaction ID : 207512-109	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 230.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : 207659-109	
Amount Incurred This Period 210.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 210.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : 207660-109	
Amount Incurred This Period 252.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 252.50

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	692.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 44
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**North Dakota Republican Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period	<b>Transaction ID : 207661-109</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="230.00"/>	<input type="text" value="0.00"/>	<input type="text" value="230.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period	<b>Transaction ID : 207662-109</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="115.00"/>	<input type="text" value="0.00"/>	<input type="text" value="115.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Forum Communications Company</b>			Nature of Debt (Purpose): Advertising
Mailing Address PO Box 2020			
City Fargo	State ND	Zip Code 58107	

Outstanding Balance Beginning This Period	<b>Transaction ID : 207510-109</b>	
<input type="text" value="260.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="255.00"/>	<input type="text" value="5.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="350.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="4074.10"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4074.10"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Forum Communications Company
Mailing Address: PO Box 2020
City: Fargo, State: ND, Zip Code: 58107
Purpose of Expenditure: Advertising
Name of Federal Candidate: Cramer, Kevin, Support
Date of Public Distribution/Dissemination: 06/07/2018
Amount: 210.00
Transaction ID: 207659
Date of Disbursement or Obligation: 06/07/2018
Name of Federal Candidate: Cramer, Kevin, Support
Office Sought: Senate, State: ND
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 5815.00

Full Name of Payee: Facebook
Mailing Address: 156 University Ave
City: Palo Alto, State: CA, Zip Code: 94304
Purpose of Expenditure: Media/Advertising
Name of Federal Candidate: Heitkamp, Heidi, Oppose
Date of Public Distribution/Dissemination: 06/12/2018
Amount: 125.00
Transaction ID: 207626
Date of Disbursement or Obligation: 05/15/2018
Name of Federal Candidate: Heitkamp, Heidi, Oppose
Office Sought: Senate, State: ND
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 48105.07

(a) SUBTOTAL of Itemized Independent Expenditures 125.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Hacker, Nicholas, Mr., [Electronically Filed] Date 08/14/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Forum Communications Company
Mailing Address: PO Box 2020
City: Fargo, State: ND, Zip Code: 58107
Purpose of Expenditure: Advertising
Date of Public Distribution/Dissemination: 06/12/2018
Amount: 255.00
Transaction ID: 207618
Date of Disbursement or Obligation: 05/19/2018
Name of Federal Candidate: Cramer, Kevin, Support
Office Sought: Senate, State: ND
Disbursement For: General 2018
Calendar Year-To-Date Per Election for Office Sought: 5815.00

Full Name of Payee: Forum Communications Company
Mailing Address: PO Box 2020
City: Fargo, State: ND, Zip Code: 58107
Purpose of Expenditure: Advertising
Date of Public Distribution/Dissemination: 06/14/2018
Amount: 252.50
Transaction ID: 207660
Date of Disbursement or Obligation: 06/14/2018
Name of Federal Candidate: Cramer, Kevin, Support
Office Sought: Senate, State: ND
Disbursement For: General 2018
Calendar Year-To-Date Per Election for Office Sought: 6067.50

(a) SUBTOTAL of Itemized Independent Expenditures: 255.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Hacker, Nicholas, , Mr.,

[Electronically Filed]

Date

08 / 14 / 2018

Signature



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

NAME OF COMMITTEE (In Full) <b>North Dakota Republican Party</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00018929
---	--

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

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Forum Communications Company</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address PO Box 2020			Amount <input type="text"/>		
City Fargo	State ND	Zip Code 58107	Transaction ID : <b>207661</b>		
Purpose of Expenditure Advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Cramer, Kevin, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 6297.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Forum Communications Company</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address PO Box 2020			Amount <input type="text"/>		
City Fargo	State ND	Zip Code 58107	Transaction ID : <b>207662</b>		
Purpose of Expenditure Advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Cramer, Kevin, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 6412.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/> 380.00

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.

*Hacker, Nicholas, , Mr.,*

*[Electronically Filed]*

Date

/  /

Signature

**SCHEDULE H1 (FEC Form 3X)**

**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)  
 North Dakota Republican Party

Transaction ID : H120180630

**USE ONLY ONE SECTION, A or B**

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Indicate ratio below**

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative       Generic Voter Drive       Public Communications Referencing Party Only

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

**A. Full Name (Last, First, Middle Initial) Transaction ID : 207634**  Memo Item

**US Postmaster**

Mailing Address 220 E Rosser Ave

City Bismarck State ND Zip Code 58501

Purpose of Disbursement: Postage

Activity or Event Identifier: Postage / Administrative

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 57296.07

Date: 06 / 28 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : 207633**  Memo Item

**Midcontinent Communications**

Mailing Address PO Box 5010

City Sioux Falls State SD Zip Code 57117

Purpose of Disbursement: Utilities

Activity or Event Identifier: Utilities / Administrative

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 57629.40

Date: 06 / 28 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.00		263.33		333.33

**C. Full Name (Last, First, Middle Initial) Transaction ID : 207652**  Memo Item

**Rambough, Janean, M, Ms.,**

Mailing Address 2103 Assumption Drive

City Bismarck State ND Zip Code 58501

Purpose of Disbursement: Payroll <25% Federal

Activity or Event Identifier: Payroll <25% Federal / Administrative

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 59330.86

Date: 06 / 29 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
357.31		1344.15		1701.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
490.31		1844.48		2334.79

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : 207654</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:			
Schefter, Dawson, , ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt			
Mailing Address 5000 28th Ave. S. Apt. 304			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support			
City Fargo State ND Zip Code 58103			<input type="checkbox"/> Public Comm (ref to party only) by PAC			
Purpose of Disbursement: Payroll <25% Federal			Allocated Activity or Event Year-To-Date			
Activity or Event Identifier: Payroll <25% Federal / Administrative			60989.80			
Category/Type			Date 06 / 29 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
348.38			1310.56			1658.94

B. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event:			
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt			
City State Zip Code			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support			
Purpose of Disbursement:			<input type="checkbox"/> Public Comm (ref to party only) by PAC			
Activity or Event Identifier:			Allocated Activity or Event Year-To-Date			
Category/Type			Date			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event:			
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt			
City State Zip Code			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support			
Purpose of Disbursement:			<input type="checkbox"/> Public Comm (ref to party only) by PAC			
Activity or Event Identifier:			Allocated Activity or Event Year-To-Date			
Category/Type			Date			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.38		1310.56		1658.94

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
838.69	3155.04	3993.73