

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**
Republican Majority Fund

ADDRESS (number and street) 901 N Washington St, Ste 700
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00296640 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2016 through 11 / 28 / 2016

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

Signature of Treasurer Koch, Theodore, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2016

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

Republican Majority Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="56794.35"/>	<input type="text" value="56794.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25525.47"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="79879.74"/>	<input type="text" value="288272.70"/>
(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="105405.21"/>	<input type="text" value="345067.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="54755.53"/>	<input type="text" value="294417.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="50649.68"/>	<input type="text" value="50649.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="3750.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Republican Majority Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	31175.00	56976.00
(ii) Unitemized	6556.00	47997.17
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	37731.00	104973.17
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	21000.00	139500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	58731.00	244473.17
12. Transfers From Affiliated/Other Party Committees.....	21148.74	43405.76
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	393.77
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	79879.74	288272.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	79879.74	288272.70

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	54755.53	229767.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	54755.53	229767.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	64000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	650.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	54755.53	294417.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54755.53	294417.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	58731.00	244473.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	58731.00	244473.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	54755.53	229767.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	393.77
38. Net Operating Expenditures (subtract Line 37 from Line 36)	54755.53	229373.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. ANDERSEN, KRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5870 CARROLLTON AVE.
 City INDIANAPOLIS State IN Zip Code 46220-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ALPHA Occupation (for Individual) VENTURE CAPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 07 / 2016
Transaction ID : SA11A.104928
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. VERHOFF, GEOFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 MUNSON RD
 City FALLS CHURCH State VA Zip Code 22041-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKIN GUMP Occupation (for Individual) SR. POLICY ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2016
Transaction ID : SA11A.104927
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HEVRDEJS, FRANK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 GREENWAY PLAZA STE. 2400
 City HOUSTON State TX Zip Code 77046-0909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE STERLING GROUP Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.106248
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. HABIB, AMELIA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 CAPE MARCO DRIVE #406
 City CAPE MARCO State FL Zip Code 34145-
 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 10 / 24 / 2016
Transaction ID : SA11A.106255
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCNEILL, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SHIMROCK RD
 City RUSSELLVILLE State AR Zip Code 72802-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TERRA RENEWAL, LLC Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.106303
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. AINLEY, PAT, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3908
 City CRESTLINE State CA Zip Code 92325-3908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AINLEY ENTERPRISES LLC Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.106342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. HAYES, FORREST, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD ISLAND	State SC	Zip Code 29928-6125
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUSTEE/DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.106343

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHROYER, WILLIAM, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 314 OLD MILITARY RD

City CONWAY	State AR	Zip Code 72034-9627
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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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.106306

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

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

Mailing Address 738 KELLY AVE

City HALF MOON BAY	State CA	Zip Code 94019-1919
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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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.106319

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. TAYLOR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 LAWTON CIRCLE
 City MAGNOLIA State AR Zip Code 71753-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN ALUMINUM Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.106335
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

B. HASBACH, D G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 E OLD BRIDGE RD
 City PALATINE State IL Zip Code 60067-2731
 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
 11 / 05 / 2016
Transaction ID : SA11A.106377
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HAYES, FORREST, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WEXFORD ON THE GREEN
 City HILTON HEAD ISLAND State SC Zip Code 29928-6125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRUSTEE/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.106378
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number 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 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. SHROYER, WILLIAM, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 OLD MILITARY RD
 City CONWAY State AR Zip Code 72034-9627
 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 11 / 05 / 2016
Transaction ID : SA11A.106371
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AINLEY, PAT, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3908
 City CRESTLINE State CA Zip Code 92325-3908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AINLEY ENTERPRISES LLC Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.106402
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARPENTER, CAROL, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 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 11 / 06 / 2016
Transaction ID : SA11A.106401
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. BLASS, GUS, , MR., II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 CENTER ST STE 800

City LITTLE ROCK	State AR	Zip Code 72201-2439
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPITAL PROPERTIES LTD.	Occupation (for Individual) GENERAL PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11A.106417

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. GRAHAM, HOWARD, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14980 KARL AVE

City MONTE SERENO	State CA	Zip Code 95030-2226
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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 ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11A.106418

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address 8704 PLYMOUTH ROAD

City ALEXANDRIA	State VA	Zip Code 22308-2509
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BGR GROUP	Occupation (for Individual) CONSULTANT
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2016

Transaction ID : SA11A.106433

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10250.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANGO, PAUL, DAVID, ,

Mailing Address **116 SNOWBERRY LANE**

City GIBSONIA	State PA	Zip Code 15044-6090
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCKINSEY & COMPANY	Occupation (for Individual) CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 15 / 2016

Transaction ID : SA11A.106434

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	31175.00

**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 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. COMPASS BANCSHARES, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 10566

City BIRMINGHAM	State AL	Zip Code 35296-0001
FEC ID number of contributing federal political committee. C C00142596		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
10 / 14 / 2016
Transaction ID : SA11C.106231

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. EXPERIAN NORTH AMERICA, INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 475 ANTON BLVD.

City COSTA MESA	State CA	Zip Code 92626-7037
FEC ID number of contributing federal political committee. C C00379768		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
10 / 14 / 2016
Transaction ID : SA11C.106232

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FMR LLC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 200 SEAPORT BLVD MAIL ZONE V9B

City BOSTON	State MA	Zip Code 02210-2031
FEC ID number of contributing federal political committee. C C00380550		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1500.00	

Date of Receipt
10 / 14 / 2016
Transaction ID : SA11C.106233

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. DELAWARE NORTH COMPANIES, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 FOUNTAIN PLZ.

City BUFFALO	State NY	Zip Code 14202-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00158899

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11C.106334

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AICPA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707-8110
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11C.106416

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 H. STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005-2110
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11C.106414

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. NATIONAL AUTOMOBILE DEALERS ASSOC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 412 FIRST ST SE

City WASHINGTON	State DC	Zip Code 20003-1804
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040998

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11C.106415

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AGSH&F CIVIC ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1333 NE HAMPSHIRE AVE NW

City WASHINGTON	State DC	Zip Code 20036-
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FEC ID number of contributing federal political committee. **C** C00104901

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2016

Transaction ID : SA11C.106533

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	21000.00

**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 16 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. COTTON VICTORY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST

City ALEXANDRIA	State VA	Zip Code 22314-5509
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00571018

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
43405.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : SA12.106649

Amount of Each Receipt this Period
21148.74

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. BRADBURY, CHARLOTTE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 EDGEHILL RD

City LITTLE ROCK	State AR	Zip Code 72207-5444
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2016

Transaction ID : SA12.106654

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: COTTON VICTORY

C. BRADBURY, CURTIS, F., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 EDGEHILL RD

City LITTLE ROCK	State AR	Zip Code 72207-5444
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
STEPHENS INC EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2016

Transaction ID : SA12.106655

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	21148.74
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CAMERON, NINA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address P.O. BOX 21440		Transaction ID : SA12.106652
City LITTLE ROCK	State AR	Zip Code 72221-1440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	JFC ATTRIB: COTTON VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CAMERON, RONALD, M., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address P.O. BOX 21440		Transaction ID : SA12.106651
City LITTLE ROCK	State AR	Zip Code 72221-1440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) MOUNTAIRE CORP.	Occupation (for Individual) CEO	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	JFC ATTRIB: COTTON VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RUTLEDGE, REYNIE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address P.O. BOX 1009		Transaction ID : SA12.106653
City SEARCY	State AR	Zip Code 72145-1009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) FIRST SECURITY BANK	Occupation (for Individual) CHAIRMAN	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	JFC ATTRIB: COTTON VICTORY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEWELL, GARY, W., MR.,

Mailing Address **3400 JUNCTION CITY HWY**

City EL DORADO	State AR	Zip Code 71730-8308
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) HAMMOND OIL COMPANY	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 28 / 2016

Transaction ID : SA12.106650

Amount of Each Receipt this Period
1000.00

Memo Item
TRANSFER

JFC ATTRIB: COTTON VICTORY

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)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	21148.74

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

Use separate schedule(s) for each category of the Detailed 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)
Republican Majority Fund

A. Campaign Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Online Fundraising & Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2016

FEC Identification Number

C
Transaction ID : B45BA66EA8
Amount of Each Disbursement this Period
826.15

Memo Item

B. Washington Nationals

Full Name (Last, First, Middle Initial)

Mailing Address 1500 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2016

FEC Identification Number

C
Transaction ID : BCDB9D37FE
Amount of Each Disbursement this Period
82.36

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 299052

City Fort Lauderdale State FL Zip Code 33329

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2016

FEC Identification Number

C
Transaction ID : B16FA6BE1C
Amount of Each Disbursement this Period
0.73

Memo Item

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

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

909.24

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Credit Card Payment: See Memos

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C [Redacted]
Transaction ID : B8E89F5A0B
 Amount of Each Disbursement this Period
 [Redacted] 2475.41

Memo Item

Full Name (Last, First, Middle Initial)

B. Allianz Travel Insurance

Mailing Address 9950 Maryland Dr

City
Richmond

State
VA

Zip Code
23233

Purpose of Disbursement
PAC Insurance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C [Redacted]
Transaction ID : B68C36D3E01
 Amount of Each Disbursement this Period
 [Redacted] 9.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Allianz Travel Insurance

Mailing Address 9950 Maryland Dr

City
Richmond

State
VA

Zip Code
23233

Purpose of Disbursement
PAC Insurance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C [Redacted]
Transaction ID : B6CF816A15
 Amount of Each Disbursement this Period
 [Redacted] 9.00

Memo Item

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

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

[Redacted]	2475.41
[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)
Republican Majority Fund

A. Allianz Travel Insurance

Full Name (Last, First, Middle Initial)

Mailing Address 9950 Maryland Dr

City Richmond State VA Zip Code 23233

Purpose of Disbursement PAC Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : **BF456FBC46**

Amount of Each Disbursement this Period: 8.50

Memo Item

B. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 619616
DFW Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : **B925321FBA**

Amount of Each Disbursement this Period: 94.10

Memo Item

C. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 619616
DFW Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : **BB49DFC59I**

Amount of Each Disbursement this Period: 73.10

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)
Republican Majority Fund

A. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 619616
DFW Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : BDF6FD1E43

Amount of Each Disbursement this Period: 94.10

Memo Item

B. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 50 Massachusettes Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement PAC Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : B5D6DD7A5D

Amount of Each Disbursement this Period: 26.25

Memo Item

C. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 50 Massachusettes Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : B7C1262BCE

Amount of Each Disbursement this Period: 280.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 50 Massachusettes Ave, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
PAC Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C []
Transaction ID : BBB580D60F
Amount of Each Disbursement this Period
[] 433.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 50 Massachusettes Ave, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
PAC Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C []
Transaction ID : BCDE0C7849
Amount of Each Disbursement this Period
[] 439.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 50 Massachusettes Ave, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
PAC Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C []
Transaction ID : BFCFCEC22
Amount of Each Disbursement this Period
[] 163.00

Memo Item

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

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

[]	0.00
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[]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)
A. Delta Airlines

Date of Disbursement: 10 / 12 / 2016

Mailing Address: 1030 Delta Blvd

City: Atlanta, State: GA, Zip Code: 30354

Purpose of Disbursement: PAC Travel

Candidate Name: [] Category/Type: []

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

State: [] District: []

FEC Identification Number: C []
Transaction ID : BCB500CAD
Amount of Each Disbursement this Period: 177.10

Memo Item

Full Name (Last, First, Middle Initial)
B. Expedia, Inc.

Date of Disbursement: 10 / 12 / 2016

Mailing Address: 333 108th Avenue, NE

City: Bellevue, State: WA, Zip Code: 98004

Purpose of Disbursement: PAC Travel

Candidate Name: [] Category/Type: []

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

State: [] District: []

FEC Identification Number: C []
Transaction ID : B0C5A0F189
Amount of Each Disbursement this Period: 381.54

Memo Item

Full Name (Last, First, Middle Initial)
C. Washington Nationals

Date of Disbursement: 10 / 12 / 2016

Mailing Address: 1500 South Capitol Street, SE

City: Washington, State: DC, Zip Code: 20003

Purpose of Disbursement: PAC Food & Beverage

Candidate Name: [] Category/Type: []

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

State: [] District: []

FEC Identification Number: C []
Transaction ID : B4C99CD73C
Amount of Each Disbursement this Period: 50.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Online Fundraising & Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2016

FEC Identification Number

C
Transaction ID : **BD48354FB0**
Amount of Each Disbursement this Period
342.46

Memo Item

Full Name (Last, First, Middle Initial)

B. Rizzo, Laura, , ,

Mailing Address 1316 Alexandria Avenue

City Alexandria State VA Zip Code 22308

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C
Transaction ID : **BCEE3E9C4C**
Amount of Each Disbursement this Period
5275.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Online Fundraising/Emails/Website Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C
Transaction ID : **B93182946B**
Amount of Each Disbursement this Period
6952.67

Memo Item

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

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

12570.13

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. D. Moss & Company, LLC		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 3722 Munson Road		FEC Identification Number C [REDACTED] Transaction ID : B6EEC99852! Amount of Each Disbursement this Period 5726.56	
City Falls Church	State VA	Zip Code 22041	Category/Type
Purpose of Disbursement PAC Fundraising Consulting/Travel			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. O'Donnell and Associates, Ltd.		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 3101 N Hampton Dr, #1517		FEC Identification Number C [REDACTED] Transaction ID : B1F8AFD5FF. Amount of Each Disbursement this Period 2161.85	
City Alexandria	State VA	Zip Code 22302	Category/Type
Purpose of Disbursement PAC Communications Consulting/Food & Beverage			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. UniSource Direct, LLC		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address PO Box 82		FEC Identification Number C [REDACTED] Transaction ID : B2DC314DB! Amount of Each Disbursement this Period 5000.00	
City Watertown	State WI	Zip Code 53094	Category/Type
Purpose of Disbursement PAC Direct Mail			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

12888.41

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Online Fundraising & Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2016

FEC Identification Number

C
Transaction ID : B279822254C
Amount of Each Disbursement this Period
202.99

Memo Item

Full Name (Last, First, Middle Initial)

B. UniSource Direct, LLC

Mailing Address PO Box 82

City Watertown State WI Zip Code 53094

Purpose of Disbursement
PAC Direct Mail

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2016

FEC Identification Number

C
Transaction ID : B080F653C82
Amount of Each Disbursement this Period
731.30

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 299052

City Fort Lauderdale State FL Zip Code 33329

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2016

FEC Identification Number

C
Transaction ID : B06B4B0631
Amount of Each Disbursement this Period
145.52

Memo Item

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

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

1079.81

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. Koch & Hoos LLC		Date of Disbursement MM / DD / YYYY 11 / 07 / 2016
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [REDACTED] Transaction ID : BA34EC07EF Amount of Each Disbursement this Period 2682.25
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] Transaction ID : B5C8D3090F Amount of Each Disbursement this Period 8396.35
City Newark	State NJ	Zip Code 07101
Purpose of Disbursement Credit Card Payment: See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016
Mailing Address P.O. Box 619616 DFW Airport		FEC Identification Number C [REDACTED] Transaction ID : B45992DBE3 Amount of Each Disbursement this Period 12.02
City Dallas	State TX	Zip Code 75261
Purpose of Disbursement PAC Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	11078.60
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address P.O. Box 619616
DFW Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2016

FEC Identification Number

C
Transaction ID : BA3EC960C7
Amount of Each Disbursement this Period
1414.48

Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address P.O. Box 619616
DFW Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2016

FEC Identification Number

C
Transaction ID : BEDC12F621
Amount of Each Disbursement this Period
25.06

Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2016

FEC Identification Number

C
Transaction ID : B567BD3311
Amount of Each Disbursement this Period
436.10

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)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Hertz Rent A Car

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2016

Mailing Address 14501 Hertz Quail Springs Pkwy

FEC Identification Number

C []
Transaction ID : B9E195B5FC
 Amount of Each Disbursement this Period
 [] 1255.89

City Oklahoma City State OK Zip Code 73134

Purpose of Disbursement
PAC Car Rental

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Marriott

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2016

Mailing Address 700 Grand Ave

FEC Identification Number

C []
Transaction ID : B03B90527C/
 Amount of Each Disbursement this Period
 [] 1075.82

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
PAC Lodging

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Marriott

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2016

Mailing Address 700 Grand Ave

FEC Identification Number

C []
Transaction ID : B85857E106I
 Amount of Each Disbursement this Period
 [] 1003.23

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
PAC Lodging

[]
Category/
Type

Candidate Name

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

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)
Republican Majority Fund

A. Southwest Airlines

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2016

FEC Identification Number: C

Transaction ID : B909B131E6

Amount of Each Disbursement this Period: 709.96

Memo Item

B. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 600 Jefferson St

City Houston State TX Zip Code 77002

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2016

FEC Identification Number: C

Transaction ID : BCC2619F51

Amount of Each Disbursement this Period: 322.10

Memo Item

C. Westin Chicago O'hare

Full Name (Last, First, Middle Initial)

Mailing Address 6100 North River Rd

City Rosemont State IL Zip Code 60018

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2016

FEC Identification Number: C

Transaction ID : B4D587E9B2

Amount of Each Disbursement this Period: 295.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. Westin Chicago O'hare		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016	
Mailing Address 6100 North River Rd		FEC Identification Number C [REDACTED] Transaction ID : B84F371E214 Amount of Each Disbursement this Period [REDACTED] 295.26	
City Rosemont	State IL	Zip Code 60018	Category/ Type [REDACTED]
Purpose of Disbursement PAC Lodging		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Westin Chicago O'hare		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016	
Mailing Address 6100 North River Rd		FEC Identification Number C [REDACTED] Transaction ID : BD694BB469! Amount of Each Disbursement this Period [REDACTED] 19.00	
City Rosemont	State IL	Zip Code 60018	Category/ Type [REDACTED]
Purpose of Disbursement PAC Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Westin San Francisco Airport		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016	
Mailing Address 1 Old Bay Shore Hwy		FEC Identification Number C [REDACTED] Transaction ID : B52FBA5CB! Amount of Each Disbursement this Period [REDACTED] 426.74	
City Millbrae	State CA	Zip Code 94030	Category/ Type [REDACTED]
Purpose of Disbursement PAC Lodging		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

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

[REDACTED] 0.00

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

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Online Fundraising/Emails/Website Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B655FD6BFC
Amount of Each Disbursement this Period
2668.42

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 Spring Hill Rd Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
PAC Credit Card/Merchant Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B46775C03E/
Amount of Each Disbursement this Period
4.90

Memo Item

Full Name (Last, First, Middle Initial)

C. D. Moss & Company, LLC

Mailing Address 3722 Munson Road

City Falls Church State VA Zip Code 22041

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B167FA7E53
Amount of Each Disbursement this Period
3750.00

Memo Item

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

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

6423.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. Koch & Hoos LLC

Mailing Address 901 N Washington St Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Accounting Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B5FEF8A352
Amount of Each Disbursement this Period
1605.00

Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. Postal Service

Mailing Address 8409 Lee Highway

City Merrifield State VA Zip Code 22116

Purpose of Disbursement
PAC PO Box Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B655BE30304
Amount of Each Disbursement this Period
610.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UniSource Direct, LLC

Mailing Address PO Box 82

City Watertown State WI Zip Code 53094

Purpose of Disbursement
PAC Direct Mail

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2016

FEC Identification Number

C
Transaction ID : B170D12113
Amount of Each Disbursement this Period
5115.61

Memo Item

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

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

7330.61

54755.53

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial)
A. Ron Johnson For Senate

Date of Disbursement

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

Mailing Address 601 Oregon Street, Suite A

FEC Identification Number

C C00482984

Transaction ID : B096524A00E

Amount of Each Disbursement this Period

1091.18

City Oshkosh State WI Zip Code 54902

Purpose of Disbursement
In-kind: Travel

Category/Type

Candidate Name

Johnson, Ron, , ,

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
B. Friends Of Todd Young

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	1	6

Mailing Address PO Box 1053

FEC Identification Number

C C00459255

Transaction ID : BD604B5DC7

Amount of Each Disbursement this Period

630.16

City Bloomington State IN Zip Code 47402

Purpose of Disbursement
In-kind: Travel

Category/Type

Candidate Name

Young, Todd, C., ,

Office Sought: House
 Senate
 President
State: IN District:

Disbursement For: 2016
 Primary General
 Other (specify)

Memo Item

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

0.00

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

0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 37
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rizzo, Laura, , ,			Nature of Debt (Purpose): PAC Fundraising Consulting
Mailing Address 1316 Alexandria Avenue			
City Alexandria	State VA	Zip Code 22308	

Outstanding Balance Beginning This Period 5275.00	Transaction ID : DB82534C87B3443F585E	
Amount Incurred This Period 0.00	Payment This Period 5275.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions			Nature of Debt (Purpose): PAC Online Fundraising/Emails/Website Se
Mailing Address 117 N Saint Asaph St			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 4220.67	Transaction ID : DF0044DBFB101452A95E	
Amount Incurred This Period 2732.00	Payment This Period 6952.67	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor D. Moss & Company, LLC			Nature of Debt (Purpose): PAC Fundraising Consulting/Travel
Mailing Address 3722 Munson Road			
City Falls Church	State VA	Zip Code 22041	

Outstanding Balance Beginning This Period 5726.56	Transaction ID : DA81BDE94D73B48A5AC8	
Amount Incurred This Period 3750.00	Payment This Period 5726.56	Outstanding Balance at Close of This Period 3750.00

1) SUBTOTALS This Period This Page (optional)..... ▶	3750.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UniSource Direct, LLC			Nature of Debt (Purpose): PAC Direct Mail
Mailing Address PO Box 82			
City Watertown	State WI	Zip Code 53094	

Outstanding Balance Beginning This Period		Transaction ID : DF9A74B324B254FEBAD2	
10115.61			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	10115.61	0.00	

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

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

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	3750.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	3750.00