

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

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00018929 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2018
Mailing Address PO BOX 2020			Amount 200.00
City FARGO	State ND	Zip Code 58107	
Purpose of Expenditure ADVERTISING		Category/Type 	Transaction ID : SE24-1.0023 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 21 / 2018
Name of Federal Candidate: HEITKAMP, HEIDI, , ,		<input type="checkbox"/> Support <input checked="" 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 247856.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2018
Mailing Address PO BOX 2020			Amount 200.00
City FARGO	State ND	Zip Code 58107	
Purpose of Expenditure ADVERTISING		Category/Type 	Transaction ID : SE24-1.0024 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 21 / 2018
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 247856.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	400.00
(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, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 / 26 / 2018

Signature