

STATEMENT OF CONTRIBUTIONS FORM 15-5

COMPLETED

Submission Date: **04/06/2020**
 Filer First Name: **Erim**
 Filer Middle Name:
 Filer Last Name: **Canligil**
 Filer's Title with Other Entity: **Chief Financial Officer**

BUSINESS INFORMATION

Business Entity Name: **Republican Governors Association**
 Business Type: **527 Non-Profit**
 Address: **1747 Pennsylvania Ave. NW, Ste. 250**
 City: **Washington**
 State: **District of Columbia**
20006
 Country: **United States**

CONTACT PERSON INFORMATION

Contact Person First Name: **Erim**
 Contact Person Last Name: **Canligil**
 Contact Person Phone: **202-662-4928**
 Contact Person Email: **ecanligil@rga.org**

CONTRIBUTIONS

Contribution Date	Group	Form of Contribution	Amount	Total Annual Contribution
03/09/2020	2020 - Keep Dunleavy	Electronic Funds Transfer	\$150,000.00	\$150,000.00

REPORT SUMMARY

Number of Contributions Reported with this Report: **1**
 Total of Contributions Reported with this Report: **\$150,000.00**

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