

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

COMMITTEE TO ELECT JEFF PHILLIPS

ADDRESS (number and street) 5109 W WENDOVER AVE

Check if different than previously reported. (ACC)

JAMESTOWN

NC

27282

2. **FEC IDENTIFICATION NUMBER** ▼

C C00556571

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

NC

06

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

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

Election on  /  /  in the State of

5. Covering Period

/  /  through  /  /

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

Type or Print Name of Treasurer Mr. William Stevens

Signature of Treasurer Mr. William Stevens

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**COMMITTEE TO ELECT JEFF PHILLIPS**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	27520.05	27520.05
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27520.05	27520.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16546.95	16546.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16546.95	16546.95
8. Cash on Hand at Close of Reporting Period (from Line 27).....	80973.10	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	71740.00	

**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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**COMMITTEE TO ELECT JEFF PHILLIPS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23010.05	23010.05
(ii) Unitemized.....	4510.00	4510.00
(iii) TOTAL of contributions from individuals ▶	27520.05	27520.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	27520.05	27520.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	70000.00	70000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	70000.00	70000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	97520.05	97520.05

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16546.95	16546.95
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	16546.95	16546.95

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	97520.05
25. SUBTOTAL (add Line 23 and Line 24).....	97520.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16546.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	80973.10

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Baranek**

Mailing Address 102 W. Decatur Street

City Madison State NC Zip Code 27025

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

Name of Employer Ziehl-Abegg Occupation VP for Key Accounts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
**250.00**  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Annette Baucom**

Mailing Address 6104 Mountain Brook Rd.

City Greensboro State NC Zip Code 27455

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

Name of Employer Pickering & Co. Occupation Co-CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 15 / 2014**

**Transaction ID : SA11AI.4170**

Amount of Each Receipt this Period  
**550.00**  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Ken Baucom**

Mailing Address 6104 Mountain Brook Road

City Greensboro State NC Zip Code 27455

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

Name of Employer Pickering & Co. Occupation Co-CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 15 / 2014**

**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
**550.00**  
 donation

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James Bryant**

Mailing Address 24 Elm Ridge Lane

City Greensboro State NC Zip Code 27408

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4218**

Amount of Each Receipt this Period  
 250.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Alex Gardner**

Mailing Address 3102 Owls Roost Rd.

City Greensboro State NC Zip Code 27410

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

Name of Employer Battleground Tire, Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 15 / 2014

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
 500.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Ms Darlene Garrett**

Mailing Address 8003 Willow Glen Trail

City Greensboro State NC Zip Code 27455

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

Name of Employer Guilford County Schools Occupation Member of Board of Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.4220**

Amount of Each Receipt this Period  
 250.00  
 donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**R Gordon**

Mailing Address 8921 Samantha Ct.

City State Zip Code  
Stokesdale NC 27357

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11AI.4166**

Amount of Each Receipt this Period  
750.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
**Merrilyn Harrison**

Mailing Address 2925 Willard Rd.

City State Zip Code  
Winston-Salem NC 27107

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 15 / 2014

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
600.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Johnson**

Mailing Address 2139 SCALESVILLE RD

City State Zip Code  
Summerfield NC 27358

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

Name of Employer Occupation  
Summerfield Fire District Fire Chief

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
1000.00  
donation

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Mr. John Kornegay</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 6409 Hunt Road		<b>Transaction ID : SA11AI.4222</b>	
City Pleasant Garden	State NC	Zip Code 27313	Amount of Each Receipt this Period _____ 250.00 donation
FEC ID number of contributing federal political committee.		C	
Name of Employer John H. Kornegay, Atty	Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Johnny K Lam</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 2205 New Garden Rd		<b>Transaction ID : SA11AI.4156</b>	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 1000.00 donation
FEC ID number of contributing federal political committee.		C	
Name of Employer Patterson & Sheridan LLP	Occupation Patent Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. James Lewis</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 15 / 2014	
Mailing Address 1101 Hammel Road		<b>Transaction ID : SA11AI.4180</b>	
City Greensboro	State NC	Zip Code 27408	Amount of Each Receipt this Period _____ 500.00 donation
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1750.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Dean Malone**

Mailing Address 6102 O'Briant Court

City Greensboro State NC Zip Code 27410

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : SA11AI.4184**

Amount of Each Receipt this Period  
500.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
**Edward Malone**

Mailing Address 6102 O'Briant Court

City Greensboro State NC Zip Code 27410

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : SA11AI.4182**

Amount of Each Receipt this Period  
500.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
**Ms Shirley Maynard**

Mailing Address 4489 Warner Road

City Pfafftown State NC Zip Code 27040

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 03 / 2014

**Transaction ID : SA11AI.4186**

Amount of Each Receipt this Period  
500.00  
donation

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth McClellan**

Mailing Address 7289 Wyatt Drive

City Summerfield State NC Zip Code 27358

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 23 / 2014

**Transaction ID : SA11AI.4420**

Amount of Each Receipt this Period  
 250.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth McClellan**

Mailing Address 7289 Wyatt Drive

City Summerfield State NC Zip Code 27358

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1823.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 22 / 2014

**Transaction ID : SA11AI.4346**

Amount of Each Receipt this Period  
 1573.00  
 In-kind - food beverage and entertainment for Meet and Greet

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gero McClellan**

Mailing Address 7289 Wyatt Drive

City Summerfield State NC Zip Code 27358

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

Name of Employer Patterson LLP Occupation Patent Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1573.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 22 / 2014

**Transaction ID : SA11AI.4343**

Amount of Each Receipt this Period  
 1573.00  
 In-kind - food beverage and entertainment for Meet and Greet

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

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

3396.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bruce F. McGuirk**

Mailing Address 6002 Armfield Court

City State Zip Code  
Summerfield NC 27358

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

Name of Employer Occupation  
John Hancock Insurance Regional Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11AI.4224**

Amount of Each Receipt this Period  
 250.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Leon Phillips**

Mailing Address 601 Rittenhouse Court

City State Zip Code  
Winston-Salem NC 27104

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 03 / 2014

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period  
 500.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda Phillips**

Mailing Address 601 Rittenhouse Court

City State Zip Code  
Winston-Salem NC 27104

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 03 / 2014

**Transaction ID : SA11AI.4190**

Amount of Each Receipt this Period  
 500.00  
 donation

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Jane Reynolds**

Mailing Address 2702 Lake Forest Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
500.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Royce Reynolds**

Mailing Address 2702 Lake Forest Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11AI.4194**

Amount of Each Receipt this Period  
500.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
**James L Rock**

Mailing Address 822 Pebble Dr

City Greensboro State NC Zip Code 27410

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

Name of Employer Wells Fargo Occupation VP & Senior Neg.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11AI.4158**

Amount of Each Receipt this Period  
1000.00  
donation

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>Mr. Allen Sadler</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 6512 NW 98th		<b>Transaction ID : SA11AI.4198</b>
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	donation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Mrs. Connie Sadler</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 6512 NW 98th		<b>Transaction ID : SA11AI.4200</b>
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	donation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Linda Shafer</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 323 Hilly Creek Ln		<b>Transaction ID : SA11AI.4160</b>
City Lewisville	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Retired	donation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles D Sheets**

Mailing Address 2754 Edinburg Dr.

City Winston-Salem State NC Zip Code 27103

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11AI.4162**

Amount of Each Receipt this Period  
 1000.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**William R Soles Jr.**

Mailing Address 621 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer Creek Road Capital Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11AI.4164**

Amount of Each Receipt this Period  
 1000.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Springthorpe**

Mailing Address 269 Crossingham Road

City Mount Airy State NC Zip Code 27030

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

Name of Employer Southdata, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11AI.4202**

Amount of Each Receipt this Period  
 500.00  
 donation

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. B. K. Stellfox**

Mailing Address 5813 Henson Farms Road

City Summerfield State NC Zip Code 27358

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

Name of Employer Gate City Occupation Purchasing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
 500.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Russ D. Stellfox**

Mailing Address 5813 Henson Farms Road

City Summerfield State NC Zip Code 27358

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

Name of Employer Purolator Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11AI.4206**

Amount of Each Receipt this Period  
 500.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Russ D. Stellfox**

Mailing Address 5813 Henson Farms Road

City Summerfield State NC Zip Code 27358

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

Name of Employer Purolator Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : SA11AI.4339**

Amount of Each Receipt this Period  
 713.05  
 In-kind - food, beverages for a Meet and Greet

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

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

1713.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William Stevens**

Mailing Address 5109 W Wendover Ave

City State Zip Code  
Jamestown NC 27282

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 22 / 2014

**Transaction ID : SA11AI.4213**

Amount of Each Receipt this Period  
 100.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William Stevens**

Mailing Address 5109 W Wendover Ave

City State Zip Code  
Jamestown NC 27282

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
301.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11AI.4215**

Amount of Each Receipt this Period  
 1.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. D. Rex Tracht**

Mailing Address 8 Waxwing Cove

City State Zip Code  
Greensboro NC 27455

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
 500.00  
 donation

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

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

601.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. George C. Waldrep Jr.**

Mailing Address 7230 Strawberry

City Summerfiled State NC Zip Code 27358

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2014

**Transaction ID : SA11AI.4210**

Amount of Each Receipt this Period  
 500.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Ralph W Williams**

Mailing Address 5014 Bearberry Point

City Greensboro State NC Zip Code 27455

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

Name of Employer Harrell Machinery Sales, Inc. Occupation Salesman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2014

**Transaction ID : SA11AI.4152**

Amount of Each Receipt this Period  
 1100.00  
 donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1600.00

23010.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Phillips**

Mailing Address 6108 Mountain Brook Rd

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C H0NC06175**

Name of Employer Phillips Wealth Management Occupation Investment Advisor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 07 / 2014**

**Transaction ID : SA11D.4400**

Amount of Each Receipt this Period  
 payment for filing fee  
**1740.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**0.00**

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 27
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Phillips**

Mailing Address 6108 Mountain Brook Rd

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C H0NC06175**

Name of Employer Phillips Wealth Management Occupation Investment Advisor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : SA13A.4105**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

Loan from Personal Funds

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Phillips**

Mailing Address 6108 Mountain Brook Rd

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C H0NC06175**

Name of Employer Phillips Wealth Management Occupation Investment Advisor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 70000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA13A.4101**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 65000.00

Loan from Personal Funds

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

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

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

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

\_\_\_\_\_ 70000.00

\_\_\_\_\_ 70000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Constituent Cloud</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 1218 Roe Ford Road		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4112</b>
City Greenville State SC Zip Code 29617	Purpose of Disbursement Voter research	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. Constituent Cloud</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1218 Roe Ford Road		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4124</b>
City Greenville State SC Zip Code 29617	Purpose of Disbursement Voter Research	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Greensboro Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 410 Sunset Drive		Amount of Each Disbursement this Period 1134.06 <b>Transaction ID : SB17.4131</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Candidate Reception	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type 003
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3134.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. KIC</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 275 South Main Street		Amount of Each Disbursement this Period 5926.27 <b>Transaction ID : SB17.4123</b>
City King State NC Zip Code 27021	Purpose of Disbursement Yard signs Category/Type 004	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. KIC</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 275 South Main Street		Amount of Each Disbursement this Period 2805.39 <b>Transaction ID : SB17.4115</b>
City King State NC Zip Code 27021	Purpose of Disbursement Yard Signs Category/Type 004	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Mrs. Elizabeth McClellan</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2014
Mailing Address 7289 Wyatt Drive		Amount of Each Disbursement this Period 1573.00 <b>Transaction ID : SB17.4348</b>
City Summerfield State NC Zip Code 27358	Purpose of Disbursement In-kind - food beverage and entertainment for Meet and Greet Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5926.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Gero McClellan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 7289 Wyatt Drive		Amount of Each Disbursement this Period 1573.00 <b>Transaction ID : SB17.4345</b>
City Summerfield State NC Zip Code 27358	Purpose of Disbursement In-kind - food beverage and entertainment for Meet and Greet	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shirley Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 3015 Dellwood Drive		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4145</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Yard sign promotion and distribution	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Shirley Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3015 Dellwood Drive		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4147</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Yard sign promotion and distribution	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2223.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Soapbox Strategic</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 9525 Hillwood Drive Suite 160		Amount of Each Disbursement this Period 2599.00 <b>Transaction ID : SB17.4113</b>
City Las Vegas State NV Zip Code 89134	Purpose of Disbursement Website Hosting 004 Category/Type	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. Mr. Russ D. Stellfox</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 5813 Henson Farms Road		Amount of Each Disbursement this Period 713.05 <b>Transaction ID : SB17.4340</b>
City Summerfield State NC Zip Code 27358	Purpose of Disbursement In-kind - food, beverages for a Meet and Greet	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address Bulk Distribution Center Pleasant Ridge Rd		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : SB17.4133</b>
City Greensboro State NC Zip Code 27498	Purpose of Disbursement Paid Return Postage permit 004 Category/Type	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3532.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Wear Yours</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 342 Tate Street		Amount of Each Disbursement this Period 1007.19 <b>Transaction ID : SB17.4106</b>
City Greensboro State NC Zip Code 27403	Purpose of Disbursement campaing t-shirts 004 Category/Type	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1007.19
<b>TOTAL</b> This Period (last page this line number only).....	15822.57



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4105

**COMMITTEE TO ELECT JEFF PHILLIPS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Jeff Phillips

Primary  
 General  
 Other (specify) ▼

Mailing Address

6108 Mountain Brook Rd

City

State

ZIP Code

Greensboro

NC

27455

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02

05

2014

none

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4101

**COMMITTEE TO ELECT JEFF PHILLIPS**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Jeff Phillips

Primary

General

Other (specify) ▼

Mailing Address

6108 Mountain Brook Rd

City

State

ZIP Code

Greensboro

NC

27455

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

65000.00

0.00

65000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

03

31

2014

none

0.00

% (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

65000.00

**TOTALS** This Period (last page in this line only)..... ▶

70000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**COMMITTEE TO ELECT JEFF PHILLIPS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jeff Phillips

Nature of Debt (Purpose):  
filing fee

Mailing Address 6108 Mountain Brook Rd

City State Zip Code  
Greensboro NC 27455

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4349

Amount Incurred This Period

1740.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1740.00

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) .....

1740.00

2) **TOTALS** This Period (last page this line number only) .....

1740.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

70000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

71740.00