

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

MATHENY FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 29328

Check if different than previously reported. (ACC)

GREENSBORO

NC

27429

2. **FEC IDENTIFICATION NUMBER** ▼

C C00555045

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 CABELL HOBBS

Signature of Treasurer CABELL HOBBS

[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

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MATHENY FOR CONGRESS

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

	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))....	165618.93	206040.13
(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)).....	165618.93	206040.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97091.38	98818.24
(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)).....	97091.38	98818.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	107221.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

MATHENY FOR CONGRESS

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).....	137220.72	176120.72
(ii) Unitemized.....	17148.21	18003.21
(iii) TOTAL of contributions from individuals ▶	154368.93	194123.93
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11250.00	11250.00
(d) The Candidate.....	0.00	666.20
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	165618.93	206040.13
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
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)..... ▶	165618.93	206040.13

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97091.38	98818.24
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. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	97091.38	98818.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	38694.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	165618.93
25. SUBTOTAL (add Line 23 and Line 24).....	204313.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97091.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	107221.89

**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 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE L. BACHMANN

Mailing Address 815 NORTHERN SHORES POINTE

City Greensboro State NC Zip Code 27455

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

Name of Employer STRATEGIC ADVISORS, INC Occupation PARTNER

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.4635

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRIS BARBEE

Mailing Address 18 B PARK VILLAGE LANE

City Greensboro State NC Zip Code 27455

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

Name of Employer WELLS FARGO ADVISORS Occupation FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.4617

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 3911 BRASS CANNON CT

City Greensboro State NC Zip Code 27410

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4544

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

3100.00

**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 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DENNIS BARRY

Mailing Address 3911 BRASS CANNON CT

City Greensboro State NC Zip Code 27410

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

Name of Employer N/A 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 Y Y
03 / 10 / 2014

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL BATEMAN

Mailing Address 3505 PRIMROSE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer BATEMAN INVESTMENT GROUP Occupation OWNER/OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address 3505 PRIMROSE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer BATEMAN INVESTMENT GROUP Occupation OWNER/OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

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

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

550.00

**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 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRIS S. BEAMAN

Mailing Address 1806 BEACHTREE RD

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.4347

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
T. RICHARD BEARD JR

Mailing Address 2908 ROUNDHILL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer SIMPSON, SCHULMAN & BEARD Occupation REAL ESTATE BROKERAGE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4333

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEVEN D. BELL

Mailing Address 9 GRANVILLE OAKS CT.

City Greensboro State NC Zip Code 27408

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

Name of Employer BELL PARTNERS, INC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 8 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN D. BELL

Mailing Address 9 GRANVILLE OAKS CT.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer BELL PARTNERS, INC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMANDA AUMAN BLACK

Mailing Address 7 PROVINCETOWN CT

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 1708 WILLOW WICK DR

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer BB&T Occupation MORTGAGE MARKET MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1750.00

**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 9 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES A. BLACK

Mailing Address 300 W CORNWALLIS DR

City Greensboro State NC Zip Code 27408

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

Name of Employer ALLIANCE COMPANIES Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 27 / 2014

Transaction ID : SA11AI.4285

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BURNS BLACKWELL

Mailing Address 539 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer TERMINIX Occupation PEST CONTROL PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 25 / 2014

Transaction ID : SA11AI.4554

Amount of Each Receipt this Period
350.00
 CONTRIBUTION

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

Mailing Address 539 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer TERMINIX Occupation PEST CONTROL PRESIDENT

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 / 28 / 2014

Transaction ID : SA11AI.4799

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

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

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

750.00

**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 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
W. HARDEN BLACKWELL

Mailing Address 11 CHARLESTON SQ.

City Greensboro State NC Zip Code 27408

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

Name of Employer TERMINIX Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIP BLAKELY

Mailing Address 3704 DOVER PARK RD

City Greensboro State NC Zip Code 27407

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

Name of Employer TIMCO Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 3704 DOVER PARK RD

City Greensboro State NC Zip Code 27407

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

Name of Employer TIMCO Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4746

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 11 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM KIRK BLALLOCK

Mailing Address 609 W. BRADDOCK RD

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
FIERCE, ISAKOWITZ & BLALOCK PARTNER

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.4660

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JASON BODFORD

Mailing Address 600 BELLEMEADE ST

City State Zip Code
GREENSBORO NC 27401

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

Name of Employer Occupation
EPES LOGISTICS SERVICES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 09 / 2014

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HOWARD L. BORUM

Mailing Address 1906 PEMBROKE RD

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
CARRUTHERS & ROTH ATTORNEY

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 / 10 / 2014

Transaction ID : SA11AI.4359

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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 12 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARIANNE BOWMAN

Mailing Address 2315 PRINCESS ANN ST

City Greensboro State NC Zip Code 27408

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

Name of Employer GBF Occupation SALES

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.4805

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICK BRADY

Mailing Address PO BOX 415

City Reidsville State NC Zip Code 27323

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

Name of Employer PAT BRADY OIL CO. 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 / 17 / 2014

Transaction ID : SA11AI.4670

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
F. COOPER BRANTLEY

Mailing Address 2013 ST. ANDREWS RD

City Greensboro State NC Zip Code 27408

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

Name of Employer NEXSEN PRUIT Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1750.00

**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 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SPENCE BROADHURST

Mailing Address 3911 HAZEL LN

City Greensboro State NC Zip Code 27408

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

Name of Employer Occupation
NEWBRIDGE BANK EXEC VP

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 / 10 / 2014

Transaction ID : SA11AI.4377

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SPENCE BROADHURST

Mailing Address 3911 HAZEL LN

City Greensboro State NC Zip Code 27408

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

Name of Employer Occupation
NEWBRIDGE BANK EXEC VP

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 / 24 / 2014

Transaction ID : SA11AI.4708

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 113 N. CHURCH ST APT 101

City Greensboro State NC Zip Code 27401

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

Name of Employer Occupation
BENSON, BROWN & FAUCHER ATTORNEY

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 / 10 / 2014

Transaction ID : SA11AI.4357

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 14 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHESTER H. BROWN III

Mailing Address 1211 HILL ST

City Greensboro State NC Zip Code 27408

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

Name of Employer **BROWN INVESTMENT PROPERTIES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

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

Transaction ID : SA11AI.4662

Amount of Each Receipt this Period
600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LISA L. BULLOCK

Mailing Address 809 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 09 / 2014

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address PO BOX 29089

City Greensboro State NC Zip Code 27429

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

Name of Employer **PILOT FINANCIAL ADVISORS** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1850.00

**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 124
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOB CHANDLER		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address 3240 COVENTRY DR		Transaction ID : SA11AI.4349	
City BURLINGTON	State NC	Zip Code 27215	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CHANDLER CONCRETE CO. INC.	Occupation EXEC VICE PRESIDENT		
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. BOB CHANDLER		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 3240 COVENTRY DR		Transaction ID : SA11AI.4883	
City BURLINGTON	State NC	Zip Code 27215	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CHANDLER CONCRETE CO. INC.	Occupation EXEC VICE PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. T E. CHANDLER		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 5348 S. NC 62		Transaction ID : SA11AI.4924	
City BURLINGTON	State NC	Zip Code 27215	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CHANDLER CONCRETE	Occupation CHAIRMAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL 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 16 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS E. CHANDLER JR

Mailing Address 2516 PINEWAY DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
CHANDLER CONCRETE CO. INC. PRESIDENT

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 / 25 / 2014

Transaction ID : SA11AI.4556

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRIAN CLARIDA

Mailing Address 2400 RETRIEVER LN

City State Zip Code
GREENSBORO NC 27455

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

Name of Employer Occupation
UNCG CLINICAL ASSISTANT PROFESSOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.4284

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
D N CLARK

Mailing Address 6 ELM RIDGE LN

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
LORILLARD TOBACCO DIRECTOR, IT INFRASTRUCTURE

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 / 24 / 2014

Transaction ID : SA11AI.4707

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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 17 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. MADISON CLARK

Mailing Address 2859 S. FAIRWAY DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
ALAMANCE ENT PHYSICIAN

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 / 14 / 2014

Transaction ID : SA11AI.4449

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER W. CLEMMONS

Mailing Address 4668 FREEDOM DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
CAROLINA BANK LOAN OFFICER

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 / 25 / 2014

Transaction ID : SA11AI.4552

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOUGLAS D. CLINE

Mailing Address 3 GRANVILLE OAKS CT

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
MAIL TRANSPORT SERVICES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2014

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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 18 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. RANDEL COBB

Mailing Address 5600 FOREST MANOR DR

City Greensboro State NC Zip Code 27410

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

Name of Employer ABACROMBIE OIL Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2014

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KELLI COLEY

Mailing Address 622 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer MERRILL LYNCH Occupation FINANCIAL ADVISOR

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.4866

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY L. COLLINS

Mailing Address 3620 ARDOCH DR

City Greensboro State NC Zip Code 27410

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

Name of Employer COLLINS & GALYON Occupation CONTRACTOR

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 / 18 / 2014

Transaction ID : SA11AI.4464

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIAN COOKE

Mailing Address 3011 ROUND HILL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer R.W. MCCOLLUM COMPNAY, INC. Occupation V.P. SALES & OPERATIONS

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.4910

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID J COOPER

Mailing Address 203 TRINITY DR

City Elon State NC Zip Code 27244

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

Name of Employer HUB INTERNATIONAL Occupation SALES

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 / 27 / 2014

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID F. COUCH

Mailing Address 5826 SAMET DR. STE 105

City High Point State NC Zip Code 27265

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

Name of Employer BLUE RIDGE COMPANIES Occupation CEO, REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.4462

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

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

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

3100.00

**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 20 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIEL CRAFT

Mailing Address 1012 COUNTRY CLUB DR

City Greensboro State NC Zip Code 27408

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

Name of Employer SELF EMPLOYED Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4904

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID CRAFT

Mailing Address 823 N. ELM ST.

City Greensboro State NC Zip Code 27401

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

Name of Employer CRAFT INSURANCE Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALAN H. CROUCH

Mailing Address 2916 FORESTDALE DRIVE

City Burlington State NC Zip Code 27215

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

Name of Employer SOMERS - PARDUE AGENCY Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.4467

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

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

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

1700.00

**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 21 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES B. CROUCH JR

Mailing Address 2529 PINEWAY DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
HARRIS, CROUCH, LONG, SCOTT & MILLER PARTNER, INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES B. CROUCH JR

Mailing Address 2529 PINEWAY DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
HARRIS, CROUCH, LONG, SCOTT & MILLER PARTNER, INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.4472

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

Mailing Address 505 W CORNWALLIS DR

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
G FORCE MARKETING 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
01 / 22 / 2014

Transaction ID : SA11AI.4273

Amount of Each Receipt this Period
50.00
CONTRIBUTION

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 22 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM DAVIS

Mailing Address 505 W CORNWALLIS DR

City Greensboro State NC Zip Code 27408

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

Name of Employer G FORCE MARKETING Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 26 / 2014

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM DAVIS

Mailing Address 505 W CORNWALLIS DR

City Greensboro State NC Zip Code 27408

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

Name of Employer G FORCE MARKETING Occupation DIRECTOR

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 / 24 / 2014

Transaction ID : SA11AI.4705

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address 505 W CORNWALLIS DR

City Greensboro State NC Zip Code 27408

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

Name of Employer G FORCE MARKETING Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

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

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 23 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
E F. DEHNERT III

Mailing Address 1201 HAMMEL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer HIGHWOODS PROPERTIES Occupation REAL ESTATE MGMT VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4319

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD J. DIGBY

Mailing Address 100 FISHER PARK CIRCLE

City Greensboro State NC Zip Code 27401

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

Name of Employer DIGBY EYE ASSOC Occupation PHYSICIAN

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 / 18 / 2014

Transaction ID : SA11AI.4474

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER T. DUNBAR

Mailing Address 3401 WILLOW GROVE CT.

City Greensboro State NC Zip Code 27410

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

Name of Employer BLUE RIDGE COMPANIES Occupation OWNER

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 / 18 / 2014

Transaction ID : SA11AI.4471

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

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

3350.00

**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 24 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
F. SAMUEL EBERTS

Mailing Address 531 S. SPRING ST.

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
LABCORP SENIOR VP

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 / 03 / 2014

Transaction ID : SA11AI.4601

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID G. EGERTON

Mailing Address 1508 KIRKPATRICK PLACE

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
D&K INVESTMENTS OWNER

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 / 19 / 2014

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 1 CAPTAINS PT.

City State Zip Code
GREENSBORO NC 27455

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

Name of Employer Occupation
N/A RETIRED

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 / 05 / 2014

Transaction ID : SA11AI.4621

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 25 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT ENOCHS

Mailing Address 900 NOTTINGHAM RD

City Greensboro State NC Zip Code 27408

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

Name of Employer STATE OF NC Occupation ATTORNEY

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 / 28 / 2014

Transaction ID : SA11AI.4779

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT FAIRCLOTH

Mailing Address 103 KIMBERLY TER

City Greensboro State NC Zip Code 27408

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

Name of Employer WELLS FARGO Occupation WEALTH ADVISOR

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 / 30 / 2014

Transaction ID : SA11AI.4827

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES H. FLYNT

Mailing Address 53 CHISHOLM CREEK RD

City DUGSPUR State VA Zip Code 24325

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

Name of Employer FLYNT AMTEX Occupation 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
 02 / 24 / 2014

Transaction ID : SA11AI.4534

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 26 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROGER GANT

Mailing Address 1918 WEST LAKE DR

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
GLEN RAVEN MILLS EXECUTIVE

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 / 14 / 2014

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANCIS X. GAVIGAN JR

Mailing Address 2900 ST. REGIS RD

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
PREMIER BANK CEO

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 / 31 / 2014

Transaction ID : SA11AI.4845

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KATHRYN L. GESSE

Mailing Address 2008 CARLISLE RD

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
MEDTRONIC SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1750.00

**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 27 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STUART WAYNE GIBBS

Mailing Address 8 HOBBS PLACE

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. C

Name of Employer TRU-CAST Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4577

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JON GLAZMAN

Mailing Address 3914 STARMOUNT DR

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. C

Name of Employer SMITH LEONARD PLLC Occupation ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4809

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 504 ELMWOOD DR

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer CHANDLER CONCRETE Occupation AREA MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3500.00

**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 28 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM M. GRAHAM

Mailing Address 1606 COLONIAL ST

City Greensboro State NC Zip Code 27408

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

Name of Employer GRAHAM PERSONEL SERVICES Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

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

Transaction ID : SA11AI.4738

Amount of Each Receipt this Period
350.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM P. GRANTHAM

Mailing Address 2527 WOODBINE RD

City Winston-Salem State NC Zip Code 27104

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

Name of Employer SOUTH ATLANTIC PACKAGING CORP Occupation VP, SALES

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.4920

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEVIN M. GREEN

Mailing Address 608 MYERS LN

City Greensboro State NC Zip Code 27408

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

Name of Employer BHHS YOST & LITTLE Occupation REALTOR

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 / 18 / 2014

Transaction ID : SA11AI.4490

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

850.00

**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 29 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYMOND F. GREENE

Mailing Address 504 GRETCHEN CT

City Greensboro State NC Zip Code 27407

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

Name of Employer UNIVERSAL TRANSPORTATION SERVICES 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 / 05 / 2014

Transaction ID : SA11AI.4619

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
L. DOUGLAS GRESHAM JR

Mailing Address 1401 ROANOKE DR.

City Greensboro State NC Zip Code 27408

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

Name of Employer JACKSON NATIONAL LIFE Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4548

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
D.H. GRIFFIN SR

Mailing Address 2202 SHIMER DR

City Jamestown State NC Zip Code 27282

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

Name of Employer D.H. GRIFFIN COMPANIES Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

3250.00

**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 30 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID H GRIFFIN

Mailing Address 5395 RIVER RD

City State Zip Code
JAMESTOWN NC 27282

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

Name of Employer Occupation
D.H. GRIFFIN COMPANIES PRESIDENT

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 / 28 / 2014

Transaction ID : SA11AI.4801

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES J. GUIDONE

Mailing Address 3800 DOVER PARK RD

City State Zip Code
GREENSBORO NC 27407

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

Name of Employer Occupation
N/A 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 / 05 / 2014

Transaction ID : SA11AI.4623

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES J. GUIDONE

Mailing Address 3800 DOVER PARK RD

City State Zip Code
GREENSBORO NC 27407

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

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

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

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

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

1800.00

**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 31 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL HALEY

Mailing Address 12121 WEST END RD

City NORTH PALM BEACH State FL Zip Code 33408

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11AI.4724

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
D. ROSS HAMILTON

Mailing Address 1000 SUNSET DR

City GREENSBORO State NC Zip Code 27408

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

Name of Employer TUGGLE DUGGINS Occupation ATTORNEY

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 / 04 / 2014

Transaction ID : SA11AI.4339

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDWARD M. HARRINGTON

Mailing Address 130 SUNSET CIRCLE UNIT 201

City GREENSBORO State NC Zip Code 27408

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

Name of Employer HAWTHORNE RESIDENTIAL Occupation PRESIDENT

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 / 18 / 2014

Transaction ID : SA11AI.4478

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 32 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEFFREY HARRIS

Mailing Address 4 CHOWAN RD

City Greensboro State NC Zip Code 27407

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

Name of Employer FURNITURELAND SOUTH Occupation EXEC. VP

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.4629

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD O. HAWKES

Mailing Address 1921 FALMOUTH DR

City Greensboro State NC Zip Code 27410

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

Name of Employer NORTHWESTERN MUTUAL Occupation INSURANCE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4570

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 537 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer UNITED FINISHERS INTERNATIONAL, 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 / 24 / 2014

Transaction ID : SA11AI.4716

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

2250.00

**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 33 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHARON HICKS

Mailing Address 1204 HAMMEL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 06 / 2014

Transaction ID : SA11AI.4351

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LESTER HILL

Mailing Address PO BOX 2610

City Greensboro State NC Zip Code 27402

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

Name of Employer COSTELLO HILL & CO Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4926

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address PO BOX 188

City Blowing Rock State NC Zip Code 28605

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

Name of Employer N/A 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 / 23 / 2014

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 34 OF 124
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) RALPH HOLT JR		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address PO BOX 819, MAY'S LAKE		Transaction ID : SA11AI.4297
City BURLINGTON	State NC	Zip Code 27216
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer HOLT HOSIERY	Occupation CHAIRMAN	
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) F D HORNADAY		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address P.O. BOX 790		Transaction ID : SA11AI.4437
City BURLINGTON	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer KNITWEAR FABRICS INC	Occupation CEO	
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) DAVID HOWARD		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 1303 BRIARCLIFF		Transaction ID : SA11AI.4407
City GREENSBORO	State NC	Zip Code 27408
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer WINDSOR INVESTMENTS	Occupation PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL 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 35 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE HOYLE

Mailing Address 18 SUNFISH POINT

City Greensboro State NC Zip Code 27455

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

Name of Employer COMPASS FINANCIAL Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4403

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIBETH HUDGINS

Mailing Address 2000 CLEBURNE ST.

City Greensboro State NC Zip Code 27408

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

Name of Employer DRESSCODE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIMOTHY H. ILBERTON

Mailing Address 308 HILLCREST DR

City High Point State NC Zip Code 27262

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

Name of Employer ILBERTON DODGE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11AI.4502

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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: PAGE 36 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARC L. ISAACSON

Mailing Address 2308 PRINCESS ANN ST

City Greensboro State NC Zip Code 27408

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

Name of Employer ISAACSON & ISAACSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4291

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAURICE N. JENNINGS JR

Mailing Address 1916 GRANVILLE RD

City Greensboro State NC Zip Code 27408

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

Name of Employer BISCUITVILLE, INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 3006 LAKE FOREST DR

City Greensboro State NC Zip Code 27408

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

Name of Employer NORTH STATE SALES CO. Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.4819

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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: PAGE 37 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEITH KAPLAN III

Mailing Address 1102 DOVER RD

City Greensboro State NC Zip Code 27408

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

Name of Employer US FOODS Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BETTY KENAN

Mailing Address PO BOX 4150

City Chapel Hill State NC Zip Code 27515

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

Name of Employer SELF EMPLOYED Occupation INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROSEMARY P. KENERLY

Mailing Address 715 SIMPSON ST.

City Greensboro State NC Zip Code 27401

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 38 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LESLIE D KETNER

Mailing Address 2317 KIRKPATRICK PLACE

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A Occupation HOMEMAKER

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 / 13 / 2014

Transaction ID : SA11AI.4654

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT C. KETNER

Mailing Address 2317 KIRKPATRICK PLACE

City Greensboro State NC Zip Code 27408

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

Name of Employer UBS FINANCIAL SERVICES Occupation FINANCIAL ADVISOR

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 / 13 / 2014

Transaction ID : SA11AI.4652

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address INFORMATION REQUESTED

City INFO REQUEST State ZZ Zip Code 99999

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

Name of Employer GOT YOU FLOORED Occupation OWNER

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 / 10 / 2014

Transaction ID : SA11AI.4393

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 39 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES F. KIRKPATRICK

Mailing Address 2024 SAINT ANDREWS RD

City Greensboro State NC Zip Code 27408

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

Name of Employer MERRILL LYNCH Occupation FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4299

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHIL KLEINMAN

Mailing Address 205 MANCHESTER PLACE

City Greensboro State NC Zip Code 27410

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

Name of Employer PERMIER STORES Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11AI.4656

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

Mailing Address 1606 NOTTINGHAM RD

City Greensboro State NC Zip Code 27408

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

Name of Employer LINCOLN FINANCIAL Occupation INSURANCE EXECUTIVE

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.4872

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

3100.00

**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 40 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT KOEHLER

Mailing Address 704 CHESTNUT HILL CT

City Greensboro State NC Zip Code 27455

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

Name of Employer PACE OF THE TRIAD Occupation PHYSICIAN

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 / 06 / 2014

Transaction ID : SA11AI.4625

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KURT KRONENFELD

Mailing Address 3909 HAZEL LANE

City Greensboro State NC Zip Code 27408

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

Name of Employer SENN DUNN Occupation EVP BUSINESS INSURANCE

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 / 10 / 2014

Transaction ID : SA11AI.4375

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 3909 HAZEL LANE

City Greensboro State NC Zip Code 27408

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

Name of Employer SENN DUNN Occupation EVP BUSINESS INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

850.00

**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 41 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY KUNBERGER

Mailing Address 1809 DALTON RD

City Greensboro State NC Zip Code 27408

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

Name of Employer ITG Occupation TEXTILE MANUFACTURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFF KUSEK

Mailing Address 5809 3RD ST S

City St. Petersburg State FL Zip Code 33705

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

Name of Employer PENN SQUARE Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 8 LEEWARD CT

City Greensboro State NC Zip Code 27455

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

Name of Employer PROTOCOL, LLC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4595

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 42 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES LEE

Mailing Address 2101 LAFAYETTE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer LEE PACKAGING LLC Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.4282

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES LEE

Mailing Address 2101 LAFAYETTE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer LEE PACKAGING LLC Occupation BUSINESS OWNER

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.4780

Amount of Each Receipt this Period
 2350.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANET G. LEE

Mailing Address 1514 EDGWDALD RD

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

2850.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 43 OF 124

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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LIZA M LEE

Mailing Address **2101 LAFAYETTE AVE**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2600.00

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

Transaction ID : SA11AI.4794

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JACK R LINDLEY

Mailing Address **2911 S. FAIRWAY DR**

City **BURLINGTON** State **NC** Zip Code **27215**

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

Name of Employer **IP PRODUCTS** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

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

Transaction ID : SA11AI.4627

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALBERT S. LINEBERRY JR

Mailing Address **536 WOODLAND DR.**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **HANES-LINEBERRY** Occupation **FUNERAL SERVICES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

3100.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 44 OF 124

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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK L. LITTRELL

Mailing Address 3934 STARMOUNT DR

City Greensboro State NC Zip Code 27410

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

Name of Employer SOURCE RECEIVABLES MANAGEMENT Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Laurie Lloyd

Mailing Address 1919 GRANVILLE RD

City Greensboro State NC Zip Code 27408

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

Name of Employer LIVLAUR DEVELOPMENT Occupation REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN LAUTEN LOMAX

Mailing Address PO BOX 35169

City Greensboro State NC Zip Code 27425

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

Name of Employer LOMAX CONSTRUCTION Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4310

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

5600.00

**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 45 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN LAUTEN LOMAX

Mailing Address **PO BOX 35169**

City **GREENSBORO** State **NC** Zip Code **27425**

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

Name of Employer **LOMAX CONSTRUCTION** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 26 / 2014

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period
600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GLEN A. LONG

Mailing Address **909 BROOKSIDE DR**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **EVONIK CORP** Occupation **SENIOR ACCOUNTS MANAGER**

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 / 18 / 2014

Transaction ID : SA11AI.4494

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
R SCOTT LOVE

Mailing Address **310 MEADOWBROOK TER**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **CELLULAR SALES** Occupation **REGIONAL DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

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

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

3700.00

**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 46 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOUGLAS MACGINNITIE

Mailing Address 505 BROOKFIELD DR NE

City ATLANTA State GA Zip Code 30342

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

Name of Employer STATE OF GEORGIA Occupation REVENUE COMMISSIONER

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 / 30 / 2014

Transaction ID : SA11AI.4825

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL MANGO

Mailing Address 628 MEYERS LANE

City GREENSBORO State NC Zip Code 27408

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

Name of Employer DRS. MANGO & LANGDON Occupation DENTIST

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 / 13 / 2014

Transaction ID : SA11AI.4650

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 628 MEYERS LANE

City GREENSBORO State NC Zip Code 27408

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

Name of Employer DRS. MANGO & LANGDON Occupation DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 47 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. REID MARKS JR

Mailing Address **PO BOX 29042**

City **GREENSBORO** State **NC** Zip Code **27429**

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

Name of Employer **BANK OF NC** Occupation **REGIONAL PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J. REID MARKS JR

Mailing Address **PO BOX 29042**

City **GREENSBORO** State **NC** Zip Code **27429**

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

Name of Employer **BANK OF NC** Occupation **REGIONAL PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **3150 N. ELM ST, SUITE 206**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **LINDBROOK DEVELOPMENT** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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 48 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R THOMAS MAYES JR

Mailing Address 700 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer PROSPERITY VENTURE PARTNERS Occupation CONSULTANT

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 / 27 / 2014

Transaction ID : SA11AI.4767

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MISTY MCCALL

Mailing Address 204 FISHER PARK CIR

City Greensboro State NC Zip Code 27401

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

Name of Employer GENUITY CONCEPTS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4308

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 1207 COUNTRY CLUB DR

City Greensboro State NC Zip Code 27408

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

Name of Employer ELECTRICAL SUPPLY AND EQUIPMENT Occupation PRESIDENT

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 / 23 / 2014

Transaction ID : SA11AI.4700

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 49 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK MCDONALD

Mailing Address 4409 LAKE WALK DR

City Greensboro State NC Zip Code 27408

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

Name of Employer: GREENDAY WASTE & RECYCLING
Occupation: OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 10 / 2014

Transaction ID : SA11AI.4395

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN MCKEE

Mailing Address 1852 BANKING ST

City Greensboro State NC Zip Code 27408

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

Name of Employer: CAMP
Occupation: PRES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOE A. MCKINNEY JR

Mailing Address 2920-C MARTINSVILLE RD

City Greensboro State NC Zip Code 27408

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

Name of Employer: MEGA BUILDERS
Occupation: PARTNER- RE DEVLOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1800.00

Date of Receipt: 01 / 17 / 2014

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period: 1800.00

CONTRIBUTION

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

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

3050.00

**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 50 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES MCQUEARY

Mailing Address 10 CRESWELL CT

City Greensboro State NC Zip Code 27407

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHERYL MCQUEARY

Mailing Address 10 CRESWELL CT

City Greensboro State NC Zip Code 27407

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

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

Transaction ID : SA11AI.4892

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
E SAMUEL MELVIN

Mailing Address 106 WILLOUGHBY BLVD

City Greensboro State NC Zip Code 27408

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

Name of Employer BRYAN FOUNDATION Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4315

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 51 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEIL METZHEISER

Mailing Address 945 HAWICK DR NW

City ATLANTA State GA Zip Code 30327

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

Name of Employer LOCKTON COMPANIES Occupation INSURANCE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEN MILLER

Mailing Address 6367 LAKE BRANDT ROAD

City SUMMERFIELD State NC Zip Code 27358

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

Name of Employer GRANVILLE 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
 02 / 10 / 2014

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RONALD S. MILSTEIN

Mailing Address 10 LOCH RIDGE CT

City GREENSBORO State NC Zip Code 27408

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

Name of Employer LORRILARD TOBACCO Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4860

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3000.00

**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 52 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONALD C. MOORE

Mailing Address 3514 WALDREN DR

City Greensboro State NC Zip Code 27408

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

Name of Employer Greensboro Grasshoppers Occupation General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOUIS MOORE

Mailing Address 4 WYNNEWOOD CT

City Greensboro State NC Zip Code 27408

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

Name of Employer BB&T Occupation EXEC. VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 2311 LAFAYETTE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer A.M MOORE AND CO. Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4916

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 53 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD L. MOORE II

Mailing Address 104 FORESTDALE

City Greensboro State NC Zip Code 27403

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

Name of Employer WEAVER FOUNDATION Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.4287

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EMILY MOORE-PLEASANT

Mailing Address 2904 HAMDEN DR

City Greensboro State NC Zip Code 27405

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 3300 ROUNDHILL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer CBRE Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4401

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 54 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL A. MURRAY

Mailing Address 3 BRYAN CT.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer BERKLEY HALL Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2014

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL A. MURRAY

Mailing Address 3 BRYAN CT.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer BERKLEY HALL Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 13 / 2014

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL R. NEAL

Mailing Address 3310 COVENTRY PLACE

City Greensboro State NC Zip Code 27405

FEC ID number of contributing federal political committee. C

Name of Employer BIO-TECH Occupation CERTIFIED PROSTHETIST-ORTHOTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

2250.00

**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 55 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD E. NOVAK

Mailing Address 1906 EDGEMONT LANE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
N/A 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
02 / 10 / 2014

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ERIN J. O'BRIEN

Mailing Address 5803 WILDROSE DRIVE

City State Zip Code
GREENSBORO NC 27410

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

Name of Employer Occupation
BELL PARTNERS SENIOR VP

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 / 04 / 2014

Transaction ID : SA11AI.4615

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KENNETH G. OVERBEY

Mailing Address 1810 MADISON AVE

City State Zip Code
GREENSBORO NC 27403

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

Name of Employer Occupation
ACCELECARE WOUND CENTERS VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 13 / 2014

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

750.00

**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 56 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLARENCE H. OWEN

Mailing Address 207 PARKMONT DR

City Greensboro State NC Zip Code 27408

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

Name of Employer: CONE HEALTH Occupation: PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 18 / 2014

Transaction ID : SA11AI.4674

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES W PAYNE

Mailing Address 3902 BEARWICK CIRCLE

City Greensboro State NC Zip Code 27406

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

Name of Employer: INTERNATIONAL TEXTILE GROUP Occupation: VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 03 / 2014

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address 3508 PRIMROSE AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer: MERCEDES BENZ OF GREENSBORO Occupation: GENERAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 03 / 2014

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

750.00

**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 57 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANTHONY B. PETITT

Mailing Address 1101 DOVER RD

City Greensboro State NC Zip Code 27408

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

Name of Employer LORILLARD TOBACCO Occupation VICE PRESIDENT

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 / 18 / 2014

Transaction ID : SA11AI.4496

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REID PHILLIPS

Mailing Address 802 BLANTON PLACE

City Greensboro State NC Zip Code 27408

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

Name of Employer BROOKS PIERCE Occupation ATTORNEY

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.4833

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARVIN J PINSON JR

Mailing Address 4405 WOODSAGE DR

City Greensboro State NC Zip Code 27410

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

Name of Employer N/A 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.4734

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 58 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER PLACENTINO

Mailing Address 1417 PISGAH CHURCH RD

City Greensboro State NC Zip Code 27455

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

Name of Employer BROWN INVESTMENT PROPERTIES Occupation SENIOR VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4648

Amount of Each Receipt this Period
 1250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARMEN R. POWELL

Mailing Address 202 MANCHESTER PL

City Greensboro State NC Zip Code 27410

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

Name of Employer SELF EMPLOYED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NIDO R. QUEBIN

Mailing Address 806 WESTCHESTER DRIVE

City High Point State NC Zip Code 27262

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

Name of Employer HIGH POINT UNIVERSITY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 13 / 2014

Transaction ID : SA11AI.4251

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

2750.00

**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 59 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TYLER R. QUINN

Mailing Address **2807 ASBURY TERRACE**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **KOTIS PROPERTIES** Occupation **LEASING ASSOCIATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 13 / 2014

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MATTHEW RANKIN

Mailing Address **204 ELMWOOD DR**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **BRANTLEY PROPERTIES** Occupation **PROPERTY MANAGEMENT**

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 / 14 / 2014

Transaction ID : SA11AI.4664

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOYCE S RAYMER

Mailing Address **623 DAVIE AVE**

City **STATESVILLE** State **NC** Zip Code **28677**

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

Name of Employer **N/A** 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 / 24 / 2014

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 60 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAY D. RAYMER

Mailing Address 1003 BLANTON PL

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer INTERGRA MED Occupation MEDICAL CLINICS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID REICH

Mailing Address 2314 PRINCESS ANN ST

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer REICH LOGISTICS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

Mailing Address 3008 FORESTDALE DR

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation RETIRED BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4900

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3850.00

**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 61 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK P. REYNOLDS

Mailing Address **PO BOX 19011**

City **GREENSBORO** State **NC** Zip Code **27419**

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

Name of Employer **CARDINAL WATER WORKS** Occupation **CAR WASH OWNER**

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 / 28 / 2014

Transaction ID : SA11AI.4782

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAROLYNN RICE

Mailing Address **4600 JEFFERSON WOOD CT**

City **GREENSBORO** State **NC** Zip Code **27410**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TYLER B. RICHARDSON

Mailing Address **216 ELMWOOD DR**

City **GREENSBORO** State **NC** Zip Code **27408**

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

Name of Employer **RICHARDSON CORP** Occupation **ASSET MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : SA11AI.4832

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

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

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

900.00

**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 62 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MATTHEW RIDDLE

Mailing Address 1714 WILLOW WICK DR

City Greensboro State NC Zip Code 27408

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

Name of Employer M33 INTEGRATED Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period
 1282.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT RIDDLE

Mailing Address 1714 WILLOW-WICK DR

City Greensboro State NC Zip Code 27408

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

Name of Employer M33 LOGISTICS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLEN M. ROMANO

Mailing Address 201 N. ELM ST STE 1405

City Greensboro State NC Zip Code 27401

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

Name of Employer ANALOG DEVICES Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4854

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

2032.00

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

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

FOR LINE NUMBER: PAGE 63 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD ROSE

Mailing Address 3512 PRIMROSE AVE

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer MASSMUTUAL Occupation GA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4868

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMIEL J. ROSSABI

Mailing Address 109 KEMP ROAD E

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. C

Name of Employer ROSSABI, BLACK, SLAUGHTER, PA Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.4532

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 2906 AMHERST AVE

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. C

Name of Employer IVARS Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 02 / 2014

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 64 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CORBIN SAPP

Mailing Address 2906 AMHERST AVE

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
IVARS PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CORBIN SAPP

Mailing Address 2906 AMHERST AVE

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
IVARS PRESIDENT

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 / 20 / 2014

Transaction ID : SA11AI.4692

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

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

Mailing Address 2906 AMHERST AVE

City State Zip Code
BURLINGTON NC 27215

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

Name of Employer Occupation
IVARS PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

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

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

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

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

300.00

**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 65 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ED SARTIN		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 1905 LAFAYETTE AVE		Transaction ID : SA11AI.4550	
City Greensboro State NC Zip Code 27408	Amount of Each Receipt this Period 1000.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer SARTIN SERVICES Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00		

Full Name (Last, First, Middle Initial) B. ROCCO C. SCARFONE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 3802 BRASSFIELD OAKS CT		Transaction ID : SA11AI.4891	
City Greensboro State NC Zip Code 27410	Amount of Each Receipt this Period 1000.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer SELF EMPLOYED Occupation RESTAURANT OWNER		
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) C. DODSON SCHENCK		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 910 W CORNWALLIS DR		Transaction ID : SA11AI.4391	
City Greensboro State NC Zip Code 27408	Amount of Each Receipt this Period 264.74 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer CBRE Occupation MANAGING DIRECTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 264.74		

SUBTOTAL of Receipts This Page (optional).....	2264.74
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 66 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
B. SCHULMAN

Mailing Address 509 CHANCERY PLACE

City Greensboro State NC Zip Code 27408

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

Name of Employer SIMPSON SCHULMAN AND BEARD Occupation REAL ESTATE

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 / 18 / 2014

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICK SCULLY

Mailing Address 5009 CASTING WAY

City Greensboro State NC Zip Code 27455

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

Name of Employer MOTORCOACH INDUSTRIES, INC Occupation VP SALES

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 / 25 / 2014

Transaction ID : SA11AI.4748

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL J. SHANNON

Mailing Address 3807 CROSSTIMBERS DR

City Greensboro State NC Zip Code 27410

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

Name of Employer LORRILARD TOBACCO Occupation EXECUTIVE

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 / 31 / 2014

Transaction ID : SA11AI.4862

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 67 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCOTT C. SHEPARD

Mailing Address 705 WOODLAND DR

City Greensboro State NC Zip Code 27408

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

Name of Employer SENN DUNN Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J KARL SHERRILL

Mailing Address 4146 QUEENS GRANT RD

City Jamestown State NC Zip Code 27282

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

Name of Employer SENN DUNN INSURANCE Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4813

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 1203 BUCKINGHAM RD

City Greensboro State NC Zip Code 27408

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

Name of Employer TIME WARNER CABLE Occupation SALES SUPERVISOR

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.4807

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 68 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARRY SIEGAL

Mailing Address 3929 TINSLEY DR

City State Zip Code
HIGH POINT NC 27265

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

Name of Employer Occupation
BSC HOLDINGS REAL ESTATE DEVELOPMENT

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 / 18 / 2014

Transaction ID : SA11AI.4676

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ADRIAN SMITH

Mailing Address 6956 TOSCANA TRCE

City State Zip Code
SUMMERFIELD NC 27358

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

Name of Employer Occupation
MCDONALDS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2014

Transaction ID : SA11AI.4236

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GREGORY P SMITH

Mailing Address 3012 REDFORD DR

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
KEN SMITH YARN PRESIDENT

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 / 19 / 2014

Transaction ID : SA11AI.4686

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 69 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT DIXON SMITH

Mailing Address 1003 W. CORNWALLIS DR

City Greensboro State NC Zip Code 27408

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

Name of Employer BLUE WATER SUPPLY Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4307

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN K. SNIDER

Mailing Address 3 LOCH RIDGE CT.

City Greensboro State NC Zip Code 27408

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

Name of Employer SNIDER FLEET SOLUTIONS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
R. DAVID SPRINKLE

Mailing Address 3000 ST. REGIS

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A 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 / 03 / 2014

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1050.00

**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 70 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM STANLEY

Mailing Address 4 BRYAN CT

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer STANLEY BENEFIT SERVICES Occupation BENEFIT CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

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

Transaction ID : SA11AI.4839

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL M. STEPHENS III

Mailing Address 1105 PEBBLE DR.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer CCI SYSTEMS Occupation TELECOMMUNICATIONS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

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

Transaction ID : SA11AI.4934

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SAMUEL G. STEPHENS

Mailing Address 3201 MADISON AVE

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. C

Name of Employer LANDMARK BUIDERS Occupation EXEC VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4331

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 71 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
B J SZAFRAN

Mailing Address 7027 FRIENDLY AVE

City Greensboro State NC Zip Code 27408

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

Name of Employer TRENT CAPITAL Occupation BUSINESS DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period
 211.99

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID H. TAYLOR

Mailing Address 5500 HARDISON BLVD

City Charlotte State NC Zip Code 26226

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

Name of Employer LORRILARD TOBACCO Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4858

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM A TESH

Mailing Address 7670 DEBOE RD

City Summerfield State NC Zip Code 27358

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

Name of Employer PEST MGMT SYSTEMS, INC Occupation OWNER

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.4798

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1461.99

**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 72 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER TREVEY

Mailing Address 2015 PEMBROKE RD

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer CARLTON SCALE Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4405

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER TREVEY

Mailing Address 2015 PEMBROKE RD

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer CARLTON SCALE 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 / 24 / 2014

Transaction ID : SA11AI.4714

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 803 BLANTON PLACE

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.4289

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 73 OF 124
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHARLES P. TRUBY JR		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2014	
Mailing Address 502 WAYCROSS DR.		Transaction ID : SA11AI.4249	
City GREENSBORO	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer CPT ENGINEERING	Occupation OWNER		
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. CHARLES P. TRUBY JR		Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 502 WAYCROSS DR.		Transaction ID : SA11AI.4573	
City GREENSBORO	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer CPT ENGINEERING	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) C. W. HARRISON TURNER		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 19 ELM RIDGE LN		Transaction ID : SA11AI.4413	
City GREENSBORO	State NC	Zip Code 27408	Amount of Each Receipt this Period _____ 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer N/A	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		

SUBTOTAL of Receipts This Page (optional).....	_____ 2500.00
TOTAL 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 74 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL E. TWILLEY

Mailing Address 912 SUNSET DR.

City Greensboro State NC Zip Code 27408

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

Name of Employer SELF EMPLOYED Occupation INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4516

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER V. VANSTORY

Mailing Address 3101 ROUND HILL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A 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 / 19 / 2014

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WESLEY SCOTT WALLACE

Mailing Address 305 WAYCROSS CT

City Greensboro State NC Zip Code 27410

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

Name of Employer KEYSTONE HOMES Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 75 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JESSE H. WASHBURN

Mailing Address 5 ELM RIDGE LANE

City Greensboro State NC Zip Code 27408

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

Name of Employer MORRISETTE PAPER 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
 01 / 28 / 2014

Transaction ID : SA11AI.4329

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS C. WATKINS

Mailing Address 105 WENTWORTH DR

City Greensboro State NC Zip Code 27408

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

Name of Employer SCHELL BRAY PLLC Occupation ATTORNEY

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 / 11 / 2014

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 105 WENTWORTH DR

City Greensboro State NC Zip Code 27408

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

Name of Employer SCHELL BRAY PLLC Occupation ATTORNEY

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 / 25 / 2014

Transaction ID : SA11AI.4549

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 76 OF 124
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK WHEELIHAN

Mailing Address 7303 HEPATICA LN

City State Zip Code
SUMMERFIELD NC 27358

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

Name of Employer Occupation
SELF EMPLOYED AUTOMOTIVE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUE D. WHITE

Mailing Address 1107 SUNSET DR

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
DONATHAN PROPERTIES OWNER

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 / 10 / 2014

Transaction ID : SA11AI.4633

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS L. WHITE JR

Mailing Address 603 SUNSET DR

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
CERTUS PROPERTIES EXECUTIVE

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 / 10 / 2014

Transaction ID : SA11AI.4379

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

3600.00

**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 77 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS L. WHITE

Mailing Address 603 SUNSET DR

City Greensboro State NC Zip Code 27408

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

Name of Employer CERTUS PROPERTIES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4856

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUSSELL R. WILSON

Mailing Address 2714 W. FRONT ST. D5

City Burlington State NC Zip Code 27215

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 319 MEADOWBROOK TERRACE

City Greensboro State NC Zip Code 27408

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

Name of Employer N/A Occupation COMMUNITY VOLUNTEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : SA11AI.4668

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

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

4000.00

**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 78 OF 124
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAROLYN J. WOODRUFF

Mailing Address 201 N. ELM ST. STE 1105

City Greensboro State NC Zip Code 27401

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

Name of Employer: WOODRUFF LAW FIRM Occupation: ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 13 / 2014

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICK WOODS

Mailing Address 1100 HAMMEL RD

City Greensboro State NC Zip Code 27408

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

Name of Employer: LOMAX PROPERTIES Occupation: VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address 3401 DONNINGTON CT

City Greensboro State NC Zip Code 27407

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

Name of Employer: HENRY JAMES BBQ Occupation: OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : SA11AI.4796

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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 79 OF 124
	<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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THERESA YON

Mailing Address 201 N. ELM ST. STE 1405

City Greensboro State NC Zip Code 27401

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

Name of Employer LEARNING TOGETHER Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

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

Transaction ID : SA11AI.4848

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

B. Full Name (Last, First, Middle Initial)
ROBERT YOUNG

Mailing Address 803 DOVER RD

City Greensboro State NC Zip Code 27408

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

Name of Employer CARRUTHERS AND ROTH Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **211.99**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4361

Amount of Each Receipt this Period
 CONTRIBUTION **211.99**

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).....

461.99

137220.72

**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 80 OF 124
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DICKSTEIN SHAPIRO LLP POLITICAL ACTION COMMITTEE

Mailing Address 1825 I ST. NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00110197

Name of Employer Occupation

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 / 31 / 2014

Transaction ID : SA11C.4922

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LABORATORY CORP PAC

Mailing Address 231 MAPLE AVE

City BURLINGTON State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C** C00314997

Name of Employer Occupation

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 / 03 / 2014

Transaction ID : SA11C.4587

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE

Mailing Address 714 GREEN VALLEY RD

City GREENSBORO State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C** C00112888

Name of Employer Occupation

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 / 31 / 2014

Transaction ID : SA11C.4829

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

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

11000.00

**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 81 OF 124
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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)
MATHENY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL L. BARBER CAMPAIGN FUND

Mailing Address 703 GREEN VALLEY RD STE 201

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee.

Name of Employer CITY OF GREENSBORO Occupation CITY COUNCIL MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.4704

Amount of Each Receipt this Period

CONTRIBUTION

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

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.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

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

TOTAL 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 82 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALAMANCE COUNTRY CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 2402 PINEWAY DR		Amount of Each Disbursement this Period 2262.97 Transaction ID : SB17.5002
City BURLINGTON	State NC Zip Code 27215	
Purpose of Disbursement FACILITY RENTAL/CATERING	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. ARISTOTLE		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 205 PENNSYLVANIA AVE. SE		Amount of Each Disbursement this Period 1981.02 Transaction ID : SB17.5200
City WASHINGTON	State DC Zip Code 20003	
Purpose of Disbursement SUBSCRIPTIONS	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) C. ARISTOTLE		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 205 PENNSYLVANIA AVE. SE		Amount of Each Disbursement this Period 1981.02 Transaction ID : SB17.5201
City WASHINGTON	State DC Zip Code 20003	
Purpose of Disbursement SUBSCRIPTIONS	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:		

SUBTOTAL of Disbursements This Page (optional).....	6225.01
TOTAL 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 83 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AUTHNET GATEWAY		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO BOX 8999		Amount of Each Disbursement this Period 44.80
City SAN FRANCISCO	State CA	
Zip Code 94128	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4954
Candidate Name	Category/Type	
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. AUTHNET GATEWAY		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO BOX 8999		Amount of Each Disbursement this Period 42.25
City SAN FRANCISCO	State CA	
Zip Code 94128	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4955
Candidate Name	Category/Type	
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. BOULTON CREATIVE		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 601 W SMITH ST.		Amount of Each Disbursement this Period 6986.88
City GREENSBORO	State NC	
Zip Code 27401	Purpose of Disbursement PRINTING	Transaction ID : SB17.5161
Candidate Name	Category/Type	
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).....	7073.93
TOTAL 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 84 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COMPLIANCE CONSULTING COMPANY OF VIRGINIA		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO BOX 365		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4951
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement COMPLIANCE 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:	

Full Name (Last, First, Middle Initial) B. COMPLIANCE CONSULTING COMPANY OF VIRGINIA		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address PO BOX 365		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4952
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement COMPLIANCE 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:	

Full Name (Last, First, Middle Initial) C. COMPULIS		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 701 MOREHEAD AVE.		Amount of Each Disbursement this Period 485.70 Transaction ID : SB17.5147
City GREENSBORO	State NC	
Zip Code 27401	Purpose of Disbursement PRINTING	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:	

SUBTOTAL of Disbursements This Page (optional).....	3485.70
TOTAL 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 85 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address PO BOX 34331		Amount of Each Disbursement this Period 461.02
City SEATTLE	State WA	
Zip Code 98124	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.5066
Candidate Name	Category/Type	
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. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address PO BOX 34331		Amount of Each Disbursement this Period 782.63
City SEATTLE	State WA	
Zip Code 98124	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.5090
Candidate Name	Category/Type	
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. DOUBLETREE		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 823.47
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Transaction ID : SB17.5257
Candidate Name	Category/Type	
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).....	2067.12
TOTAL 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 86 OF 124			
	<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)
MATHENY FOR CONGRESS

A. E CONTACT SYSTEM

Full Name (Last, First, Middle Initial)
Mailing Address 210 N MAIN ST, STE 330

City KERNERSVILLE State NC Zip Code 27282

Purpose of Disbursement SOFTWARE PURCHASE

Candidate Name

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

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 149.95

Transaction ID : SB17.5192

B. EVENTBRITE

Full Name (Last, First, Middle Initial)
Mailing Address 651 BRANNAN ST

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement BANK FEE

Candidate Name

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

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 664.97

Transaction ID : SB17.4943

C. EXPEDIA.COM

Full Name (Last, First, Middle Initial)
Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

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

State: District:

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 515.28

Transaction ID : SB17.5244

SUBTOTAL of Disbursements This Page (optional) 1330.28

TOTAL 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 87 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 1601 S CALIFORNIA AVE.		Amount of Each Disbursement this Period 83.68 Transaction ID : SB17.5280
City PALO ALTO State CA Zip Code 94304	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	
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. FACEBOOK		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1601 S CALIFORNIA AVE.		Amount of Each Disbursement this Period 87.25 Transaction ID : SB17.5281
City PALO ALTO State CA Zip Code 94304	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	
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. FAIRWAY OUTDOOR		Date of Disbursement MM / DD / YYYY 01 / 20 / 2014
Mailing Address 1920 WEST LEE ST.		Amount of Each Disbursement this Period 1063.22 Transaction ID : SB17.5100
City GREENSBORO State NC Zip Code 27403	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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).....	1234.15
TOTAL 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 88 OF 124			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FAIRWAY OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 1920 WEST LEE ST.		Amount of Each Disbursement this Period 282.00 Transaction ID : SB17.5101
City GREENSBORO State NC Zip Code 27403	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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. FAIRWAY OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 1920 WEST LEE ST.		Amount of Each Disbursement this Period 2538.00 Transaction ID : SB17.5102
City GREENSBORO State NC Zip Code 27403	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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. FAIRWAY OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 1920 WEST LEE ST.		Amount of Each Disbursement this Period 9568.96 Transaction ID : SB17.5105
City GREENSBORO State NC Zip Code 27403	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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).....	12388.96
TOTAL 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 89 OF 124		
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 942 S SHADY GROVE RD.		Amount of Each Disbursement this Period 188.95 Transaction ID : SB17.5159
City MEMPHIS State TN Zip Code 38120	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 942 S SHADY GROVE RD.		Amount of Each Disbursement this Period 141.71 Transaction ID : SB17.5162
City MEMPHIS State TN Zip Code 38120	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 942 S SHADY GROVE RD.		Amount of Each Disbursement this Period 137.69 Transaction ID : SB17.5171
City MEMPHIS State TN Zip Code 38120	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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).....	468.35
TOTAL 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 90 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRESH MARKET		Date of Disbursement
Mailing Address 628 GREEN VALLEY RD STE 500		M M / D D / Y Y Y Y 02 / 19 / 2014
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement FOOD/BEVERAGE	Amount of Each Disbursement this Period 106.75
Candidate Name	Category/Type	Transaction ID : SB17.5061
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. GENUITY CONCEPTS		Date of Disbursement
Mailing Address 507 N CHURCH ST.		M M / D D / Y Y Y Y 01 / 15 / 2014
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement PRINTING	Amount of Each Disbursement this Period 1157.85
Candidate Name	Category/Type	Transaction ID : SB17.5145
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. GENUITY CONCEPTS		Date of Disbursement
Mailing Address 507 N CHURCH ST.		M M / D D / Y Y Y Y 02 / 04 / 2014
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement PRINTING	Amount of Each Disbursement this Period 1312.85
Candidate Name	Category/Type	Transaction ID : SB17.5155
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).....	2577.45
TOTAL 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 91 OF 124		
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GENUITY CONCEPTS		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 507 N CHURCH ST.		Amount of Each Disbursement this Period 1765.45 Transaction ID : SB17.5156
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. GENUITY CONCEPTS		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 507 N CHURCH ST.		Amount of Each Disbursement this Period 233.50 Transaction ID : SB17.5170
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. G FORCE MARKETING		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 3300 BATTLEGROUND AVE STE 101		Amount of Each Disbursement this Period 4357.90 Transaction ID : SB17.5096
City GREENSBORO State NC Zip Code 27410	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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).....	6356.85
TOTAL 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 92 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. G FORCE MARKETING		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 3300 BATTLEGROUND AVE STE 101		Amount of Each Disbursement this Period 739.30 Transaction ID : SB17.5103
City GREENSBORO State NC Zip Code 27410	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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. G FORCE MARKETING		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 3300 BATTLEGROUND AVE STE 101		Amount of Each Disbursement this Period 1789.00 Transaction ID : SB17.5104
City GREENSBORO State NC Zip Code 27410	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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. G FORCE MARKETING		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 3300 BATTLEGROUND AVE STE 101		Amount of Each Disbursement this Period 9851.76 Transaction ID : SB17.5106
City GREENSBORO State NC Zip Code 27410	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	
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).....	12380.06
TOTAL 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 93 OF 124		
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. GRAPHIC CONNECTIONS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		04		2014
M M	/	D D	/	Y Y Y Y								
02		04		2014								
Mailing Address 116 LANDMARK DR.		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>GREENSBORO</td> <td>NC</td> <td>27409</td> </tr> </table>		City	State	Zip Code	GREENSBORO	NC	27409	<table border="1"> <tr> <td>573.88</td> </tr> </table>	573.88			
City	State	Zip Code										
GREENSBORO	NC	27409										
573.88												
Purpose of Disbursement PRINTING		Transaction ID : SB17.5154										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Primary</td> <td><input type="checkbox"/></td> <td>General</td> </tr> <tr> <td><input type="checkbox"/></td> <td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)					
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General									
<input type="checkbox"/>	Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. GRAPHIC CONNECTIONS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		23		2014
M M	/	D D	/	Y Y Y Y								
02		23		2014								
Mailing Address 116 LANDMARK DR.		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>GREENSBORO</td> <td>NC</td> <td>27409</td> </tr> </table>		City	State	Zip Code	GREENSBORO	NC	27409	<table border="1"> <tr> <td>145.00</td> </tr> </table>	145.00			
City	State	Zip Code										
GREENSBORO	NC	27409										
145.00												
Purpose of Disbursement PRINTING		Transaction ID : SB17.5163										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Primary</td> <td><input type="checkbox"/></td> <td>General</td> </tr> <tr> <td><input type="checkbox"/></td> <td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)					
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General									
<input type="checkbox"/>	Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. GRAPHIC CONNECTIONS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		05		2014
M M	/	D D	/	Y Y Y Y								
03		05		2014								
Mailing Address 116 LANDMARK DR.		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>GREENSBORO</td> <td>NC</td> <td>27409</td> </tr> </table>		City	State	Zip Code	GREENSBORO	NC	27409	<table border="1"> <tr> <td>130.00</td> </tr> </table>	130.00			
City	State	Zip Code										
GREENSBORO	NC	27409										
130.00												
Purpose of Disbursement PRINTING		Transaction ID : SB17.5164										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Primary</td> <td><input type="checkbox"/></td> <td>General</td> </tr> <tr> <td><input type="checkbox"/></td> <td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)					
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General									
<input type="checkbox"/>	Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	848.88
TOTAL 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 94 OF 124			
	<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)
MATHENY FOR CONGRESS

A. GRAPHIC CONNECTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 116 LANDMARK DR.

City Greensboro State NC Zip Code 27409

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 25 / 2014

Amount of Each Disbursement this Period: 774.83

Transaction ID : SB17.5169

B. HARRIS TEETER

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 10100

City MATTHEWS State NC Zip Code 28106

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 27 / 2014

Amount of Each Disbursement this Period: 143.56

Transaction ID : SB17.5020

C. HARRIS TEETER

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 10100

City MATTHEWS State NC Zip Code 28106

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 27 / 2014

Amount of Each Disbursement this Period: 230.21

Transaction ID : SB17.5021

SUBTOTAL of Disbursements This Page (optional) 1148.60

TOTAL 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 95 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HARRIS TEETER		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address PO BOX 10100		Amount of Each Disbursement this Period 128.79
City MATTHEWS State NC Zip Code 28106	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	Transaction ID : SB17.5048
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. HARRIS TEETER		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO BOX 10100		Amount of Each Disbursement this Period 351.27
City MATTHEWS State NC Zip Code 28106	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	Transaction ID : SB17.5060
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. HARRIS TEETER		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO BOX 10100		Amount of Each Disbursement this Period 128.76
City MATTHEWS State NC Zip Code 28106	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	Transaction ID : SB17.5062
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).....	608.82
TOTAL 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 96 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HARRIS TEETER			Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address PO BOX 10100			Amount of Each Disbursement this Period 870.71	
City MATTHEWS	State NC	Zip Code 28106	Transaction ID : SB17.5086	
Purpose of Disbursement FOOD/BEVERAGE		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. HILTON HOTEL			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 7930 JONES BRANCH DR.			Amount of Each Disbursement this Period 302.36	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB17.5232	
Purpose of Disbursement 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:				

Full Name (Last, First, Middle Initial) C. IVARS			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014	
Mailing Address PO BOX 2449			Amount of Each Disbursement this Period 437.68	
City BURLINGTON	State NC	Zip Code 27216	Transaction ID : SB17.5152	
Purpose of Disbursement PRINTING		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:				

SUBTOTAL of Disbursements This Page (optional).....	870.71
TOTAL 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 97 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LAMAR COMPANIES		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 4603 HICKORY BLVD		Amount of Each Disbursement this Period 3600.00 Transaction ID : SB17.5098
City GRANITE FALLS	State NC	
Zip Code 28630	Purpose of Disbursement MEDIA	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. LOX STOCK & BAGEL DELI		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2439 BATTLEGROUND AVE.		Amount of Each Disbursement this Period 20.02 Transaction ID : SB17.5089
City GREENSBORO	State NC	
Zip Code 27408	Purpose of Disbursement FOOD/BEVERAGE	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) C. MARIA'S CATERING		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 2130 LAWDALE DR		Amount of Each Disbursement this Period 546.15 Transaction ID : SB17.4949
City GREENSBORO	State NC	
Zip Code 27408	Purpose of Disbursement CATERING	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:	

SUBTOTAL of Disbursements This Page (optional).....	4166.15
TOTAL 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 98 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MATTHEWS MOBILE MEDIA		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 101 S SWING RD.		Amount of Each Disbursement this Period 2892.93 Transaction ID : SB17.5166
City GREENSBORO State NC Zip Code 27409	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 30.12 Transaction ID : SB17.4958
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	
Candidate Name	Category/Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 2.19 Transaction ID : SB17.4971
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	
Candidate Name	Category/Type	
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).....	2925.24
TOTAL 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 99 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 19.70 Transaction ID : SB17.4972
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	
Candidate Name		Category/Type
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 18.82 Transaction ID : SB17.4973
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	
Candidate Name		Category/Type
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 3.50 Transaction ID : SB17.4974
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	
Candidate Name		Category/Type
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).....	42.02
TOTAL 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 100 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.4975
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 25.24 Transaction ID : SB17.4976
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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) C. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 5.69 Transaction ID : SB17.4977
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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:	

SUBTOTAL of Disbursements This Page (optional).....	65.93
TOTAL 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 101 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 8.75
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4978
Candidate Name	Category/Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 4.38
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4979
Candidate Name	Category/Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 3.50
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4980
Candidate Name	Category/Type	
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).....	16.63
TOTAL 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 102 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 19.69 Transaction ID : SB17.4981
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 39.86 Transaction ID : SB17.4982
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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) C. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 1.10 Transaction ID : SB17.4983
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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:	

SUBTOTAL of Disbursements This Page (optional).....	60.65
TOTAL 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 103 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 6.57
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4984
Candidate Name	Category/ Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 14.23
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4985
Candidate Name	Category/ Type	
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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 40.51
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	Transaction ID : SB17.4986
Candidate Name	Category/ Type	
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).....	61.31
TOTAL 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 104 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 14.45 Transaction ID : SB17.4987
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 448 S HILL ST STE 200		Amount of Each Disbursement this Period 37.19 Transaction ID : SB17.4988
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement CREDIT CARD MERCHANT FEES	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) C. NORTH CAROLINA BOARD OF ELECTIONS		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address PO BOX 27255		Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.5004
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement FILING FEE	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:	

SUBTOTAL of Disbursements This Page (optional).....	1791.64
TOTAL 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 105 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NORTH CAROLINA WILDLIFE HABITAT FOUNDATION		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2014
Mailing Address PO BOX 29187		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5173
City GREENSBORO State NC Zip Code 27429	Purpose of Disbursement REGISTRATION FEE	
Candidate Name	Category/Type	
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. NORTH CAROLINA WILDLIFE HABITAT FOUNDATION		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO BOX 29187		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5176
City GREENSBORO State NC Zip Code 27429	Purpose of Disbursement REGISTRATION FEE	
Candidate Name	Category/Type	
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. O. HENRY HOTEL		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 624 GREEN VALLEY RD.		Amount of Each Disbursement this Period 327.50 Transaction ID : SB17.5000
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement FACILITY RENTAL/CATERING	
Candidate Name	Category/Type	
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).....	1427.50
TOTAL 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 106 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 1671.65
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement EQUIPMENT PURCHASE/OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.4995
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 51.18
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.5107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 37.84
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.5108
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1760.67
TOTAL 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 107 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 642.69 Transaction ID : SB17.5111
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
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. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 463.27 Transaction ID : SB17.4992
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement EQUIPMENT PURCHASE	
Candidate Name	Category/Type	
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. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 104.69 Transaction ID : SB17.5112
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
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).....	642.69
TOTAL 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 108 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement														
Mailing Address 2620 WANDERSON LN.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		27		2014				
M M	/	D D	/	Y Y Y Y												
01		27		2014												
City AUSTIN	State TX	Zip Code 78757														
Purpose of Disbursement EQUIPMENT PURCHASE	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>156.28</td> </tr> </table>		Amount of Each Disbursement this Period	156.28												
Amount of Each Disbursement this Period																
156.28																
Candidate Name	<table border="1"> <tr> <td>Transaction ID : SB17.4993</td> </tr> </table>		Transaction ID : SB17.4993													
Transaction ID : SB17.4993																
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement														
Mailing Address 2620 WANDERSON LN.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		30		2014				
M M	/	D D	/	Y Y Y Y												
01		30		2014												
City AUSTIN	State TX	Zip Code 78757														
Purpose of Disbursement EQUIPMENT PURCHASE	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>172.19</td> </tr> </table>		Amount of Each Disbursement this Period	172.19												
Amount of Each Disbursement this Period																
172.19																
Candidate Name	<table border="1"> <tr> <td>Transaction ID : SB17.4994</td> </tr> </table>		Transaction ID : SB17.4994													
Transaction ID : SB17.4994																
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement														
Mailing Address 2620 WANDERSON LN.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		05		2014				
M M	/	D D	/	Y Y Y Y												
02		05		2014												
City AUSTIN	State TX	Zip Code 78757														
Purpose of Disbursement OFFICE SUPPLIES	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>40.97</td> </tr> </table>		Amount of Each Disbursement this Period	40.97												
Amount of Each Disbursement this Period																
40.97																
Candidate Name	<table border="1"> <tr> <td>Transaction ID : SB17.5113</td> </tr> </table>		Transaction ID : SB17.5113													
Transaction ID : SB17.5113																
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>369.44</td> </tr> </table>	369.44
369.44		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 109 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 258.88
City AUSTIN	State TX	
Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.5116
Candidate Name	Category/Type	
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. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 30.39
City AUSTIN	State TX	
Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.5117
Candidate Name	Category/Type	
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. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 106.33
City AUSTIN	State TX	
Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.5118
Candidate Name	Category/Type	
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).....	395.60
TOTAL 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 110 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. OFFICE DEPOT

Mailing Address 2620 WANDERSON LN.

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 14 / 2014

Amount of Each Disbursement this Period: 24.84

Transaction ID : SB17.5119

Full Name (Last, First, Middle Initial)
B. OFFICE DEPOT

Mailing Address 2620 WANDERSON LN.

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 20 / 2014

Amount of Each Disbursement this Period: 40.82

Transaction ID : SB17.5121

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

Mailing Address 2620 WANDERSON LN.

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 24 / 2014

Amount of Each Disbursement this Period: 39.64

Transaction ID : SB17.5122

SUBTOTAL of Disbursements This Page (optional) 105.30

TOTAL 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 111 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 40.55
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.5123
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 16.97
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.5124
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2620 WANDERSON LN.		Amount of Each Disbursement this Period 124.18
City AUSTIN State TX Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.5125
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	181.70
TOTAL 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 112 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OLD EBBITT GRILL		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 675 15TH STREET NW		Amount of Each Disbursement this Period 221.08 Transaction ID : SB17.5047
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement FOOD/BEVERAGE	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. OLD EBBITT GRILL		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 675 15TH STREET NW		Amount of Each Disbursement this Period 195.23 Transaction ID : SB17.5067
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement FOOD/BEVERAGE	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) C. PAINTED PLATE CATERING		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 2001 N CHURCH ST.		Amount of Each Disbursement this Period 1142.50 Transaction ID : SB17.4947
City GREENSBORO	State NC	
Zip Code 27405	Purpose of Disbursement CATERING	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:	

SUBTOTAL of Disbursements This Page (optional).....	1558.81
TOTAL 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 113 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROXIMITY HOTEL		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 704 GREEN VALLEY RD.		Amount of Each Disbursement this Period 473.77
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	Transaction ID : SB17.5216
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. RENTAL WORKS		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 510 N ELM ST.		Amount of Each Disbursement this Period 260.06
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement EQUIPMENT RENTAL	
Candidate Name	Category/Type	Transaction ID : SB17.4998
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. REPUBLICAN PARTY OF HIGH POINT		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 1721 N MAIN ST.		Amount of Each Disbursement this Period 3000.00
City HIGH POINT State NC Zip Code 27262	Purpose of Disbursement REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.5175
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).....	3733.83
TOTAL 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 114 OF 124	
	<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)
MATHENY FOR CONGRESS

A. SAMET PROPERTIES

Full Name (Last, First, Middle Initial)
Mailing Address 309 GALLIMORE DAIRY RD.

City GREENSBORO State NC Zip Code 27409

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2014

Amount of Each Disbursement this Period: 875.00

Transaction ID : SB17.5186

B. SAMET PROPERTIES

Full Name (Last, First, Middle Initial)
Mailing Address 309 GALLIMORE DAIRY RD.

City GREENSBORO State NC Zip Code 27409

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2014

Amount of Each Disbursement this Period: 875.00

Transaction ID : SB17.5187

C. SAMET PROPERTIES

Full Name (Last, First, Middle Initial)
Mailing Address 309 GALLIMORE DAIRY RD.

City GREENSBORO State NC Zip Code 27409

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2014

Amount of Each Disbursement this Period: 875.00

Transaction ID : SB17.5188

SUBTOTAL of Disbursements This Page (optional) 2625.00

TOTAL 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 115 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAMET PROPERTIES		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 309 GALLIMORE DAIRY RD.		Amount of Each Disbursement this Period 875.00 Transaction ID : SB17.5189
City GREENSBORO State NC Zip Code 27409	Purpose of Disbursement RENT	
Candidate Name	Category/Type	
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. SHEETZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 2628 ALAMANCE RD		Amount of Each Disbursement this Period 65.76 Transaction ID : SB17.5263
City BURLINGTON State NC Zip Code 27215	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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. SHEETZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 2628 ALAMANCE RD		Amount of Each Disbursement this Period 7.64 Transaction ID : SB17.5266
City BURLINGTON State NC Zip Code 27215	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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).....	948.40
TOTAL 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 116 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL OIL		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 72.63
City HOUSTON State TX Zip Code 77252	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	Transaction ID : SB17.5259
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. SNAP PUBLICATIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 201 N ELM ST STE 201		Amount of Each Disbursement this Period 795.00
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement MEDIA	
Candidate Name	Category/Type	Transaction ID : SB17.5168
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. TIME WARNER CABLE		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO BOX 60074		Amount of Each Disbursement this Period 659.55
City CITY OF INDUSTRY State CA Zip Code 91716	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	Transaction ID : SB17.5273
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).....	1527.18
TOTAL 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 117 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TOTAL WINE & MORE		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 11325 SEVEN LOCKS RD, STE 214		Amount of Each Disbursement this Period 446.63 Transaction ID : SB17.5019
City POTOMAC State MD Zip Code 20854	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	
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. TOTAL WINE & MORE		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 11325 SEVEN LOCKS RD, STE 214		Amount of Each Disbursement this Period 154.66 Transaction ID : SB17.5022
City POTOMAC State MD Zip Code 20854	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	
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. TOTAL WINE & MORE		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2014
Mailing Address 11325 SEVEN LOCKS RD, STE 214		Amount of Each Disbursement this Period 193.35 Transaction ID : SB17.5059
City POTOMAC State MD Zip Code 20854	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	
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).....	794.64
TOTAL 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 118 OF 124		
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 4000 E SKY HARBOR BLVD.		Amount of Each Disbursement this Period 207.00 Transaction ID : SB17.5220
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 4000 E SKY HARBOR BLVD.		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5226
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 4000 E SKY HARBOR BLVD.		Amount of Each Disbursement this Period 324.00 Transaction ID : SB17.5264
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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).....	556.00
TOTAL 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 119 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 4000 E SKY HARBOR BLVD.		Amount of Each Disbursement this Period 324.00 Transaction ID : SB17.5265
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement 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:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 147.00 Transaction ID : SB17.5136
City GREENSBORO	State NC	
Zip Code 27401	Purpose of Disbursement POSTAGE	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) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.5137
City GREENSBORO	State NC	
Zip Code 27401	Purpose of Disbursement POSTAGE	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:	

SUBTOTAL of Disbursements This Page (optional).....	569.00
TOTAL 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 120 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 148.82
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement POSTAGE	
Candidate Name		Transaction ID : SB17.5138
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 98.00
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement POSTAGE	
Candidate Name		Transaction ID : SB17.5139
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 98.00
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement POSTAGE	
Candidate Name		Transaction ID : SB17.5140
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	344.82
TOTAL 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 121 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 201 N MURROW BLVD.		Amount of Each Disbursement this Period 147.00 Transaction ID : SB17.5141
City GREENSBORO State NC Zip Code 27401	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
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. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 1601 C WESTOVER TERRACE		Amount of Each Disbursement this Period 210.00 Transaction ID : SB17.5204
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement TELEPHONE SERVICE	
Candidate Name	Category/Type	
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. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1601 C WESTOVER TERRACE		Amount of Each Disbursement this Period 326.67 Transaction ID : SB17.5205
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement TELEPHONE SERVICE	
Candidate Name	Category/Type	
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).....	683.67
TOTAL 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 122 OF 124			
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1601 C WESTOVER TERRACE		Amount of Each Disbursement this Period 2390.16 Transaction ID : SB17.5206
City GREENSBORO State NC Zip Code 27408	Purpose of Disbursement TELEPHONE SERVICE	
Candidate Name	Category/Type	
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. VITAL SIGNS		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 6215 REATA DR.		Amount of Each Disbursement this Period 1910.03 Transaction ID : SB17.5158
City SUMMERFIELD State NC Zip Code 27358	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
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. WESTIN HOTELS		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address ONE STAR POINT		Amount of Each Disbursement this Period 345.66 Transaction ID : SB17.5284
City STAMFORD State CT Zip Code 06902	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
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).....	2390.16
TOTAL 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 123 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WESTIN HOTELS		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address ONE STAR POINT		Amount of Each Disbursement this Period 253.12 Transaction ID : SB17.5285
City STAMFORD	State CT Zip Code 06902	
Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) B. NICK WILKINSON		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO BOX 29328		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4939
City GREENSBORO	State NC Zip Code 27429	
Purpose of Disbursement POLITICAL STRATEGY 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:		

Full Name (Last, First, Middle Initial) C. NICK WILKINSON		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO BOX 29328		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB17.4940
City GREENSBORO	State NC Zip Code 27429	
Purpose of Disbursement POLITICAL STRATEGY 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:		

SUBTOTAL of Disbursements This Page (optional).....	2253.12
TOTAL 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 124 OF 124	
	<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)
MATHENY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NICK WILKINSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address PO BOX 29328		Amount of Each Disbursement this Period 314.91 Transaction ID : SB17.4941
City GREENSBORO	State NC	
Zip Code 27429	Purpose of Disbursement PRINTING	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. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 942 S SHADY GROVE RD.		Amount of Each Disbursement this Period 314.91 Transaction ID : SB17.4941.0 [MEMO ITEM]
City MEMPHIS	State TN	
Zip Code 38120	Purpose of Disbursement PRINTING	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) C.		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:	

SUBTOTAL of Disbursements This Page (optional).....	314.91
TOTAL This Period (last page this line number only).....	91376.80