

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 COAKLEY FOR CONGRESS ELECTION COMMITTEE

ADDRESS (number and street) PO BOX 480279 CHARLOTTE NC 28269 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00558106 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT NC 12

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 05 / 06 / 2014 in the State of NC (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 04 / 16 / 2014

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 Thomas Datwyler

Signature of Treasurer Thomas Datwyler [Electronically Filed] Date 04 / 24 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

COAKLEY FOR CONGRESS ELECTION COMMITTEE

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))....	4440.00	60021.65
(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)).....	4440.00	60021.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15596.27	35423.11
(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)).....	15596.27	35423.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	24598.54	
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

COAKLEY FOR CONGRESS ELECTION COMMITTEE

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).....	3250.00	38850.00
(ii) Unitemized.....	1190.00	9871.65
(iii) TOTAL of contributions from individuals ▶	4440.00	48721.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4440.00	60021.65
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)..... ▶	4440.00	60021.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15596.27	35423.11
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) ▶	15596.27	35423.11

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	35754.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4440.00
25. SUBTOTAL (add Line 23 and Line 24).....	40194.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15596.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	24598.54

**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 14
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mary Anne Dickson

Mailing Address 2633 Richardson Drive
Apt 7-D

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
Retired 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
04 / 10 / 2014

Transaction ID : SA11AI.4613

Amount of Each Receipt this Period
1000.00

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

Mailing Address 109 Pineway St

City State Zip Code
Garner NC 27529

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

Name of Employer Occupation
Tarheel Commodities, Inc Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2014

Transaction ID : SA11AI.4623

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2633 Richardson Drive

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
Retired 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
04 / 14 / 2014

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period
250.00

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 6 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
George Rohe

Mailing Address 4101 Black Sycamore Drive

City Charlotte State NC Zip Code 28226

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

Name of Employer Self-Employed Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11Al.4640

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 8625 Arbor Creek Drive		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.4651
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Bank Fees	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Capital Promotions Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 249 N. Keswick Ave.		Amount of Each Disbursement this Period 507.00 Transaction ID : SB17.4659
City Glenside	State PA	
Zip Code 19038	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Care of Advantage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2300 Clarendon Boulevard Ste. 303		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4655
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	823.00
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 8 OF 14			
	<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	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Davidson County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 335 Cunningham Brick Yard Road		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4664
City Lexington State NC Zip Code 27292	Purpose of Disbursement Event Registration Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 2250.00 Transaction ID : SB17.4654
City Charlotte State NC Zip Code 28277	Purpose of Disbursement Campaign Consulting Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.4644
City Charlotte State NC Zip Code 28277	Purpose of Disbursement Expense Reimbursement Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2415.00
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 9 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 512 Means St Ste 404		Amount of Each Disbursement this Period 75.00
City Atlanta	State GA Zip Code 30318	
Purpose of Disbursement Email Marketing	Category/Type 001	Transaction ID : SB17.4644.0 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 369.08
City Charlotte	State NC Zip Code 28213	
Purpose of Disbursement Mileage Reimbursement	Category/Type 001	Transaction ID : SB17.4670
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 1.03
City San Jose	State CA Zip Code 95131	
Purpose of Disbursement Credit Card Fee	Category/Type 001	Transaction ID : SB17.4647
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	370.11
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 10 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.4646
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit Card Fee 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Photos by James Piedad		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2520 Fernwood Drive		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.4657
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Photography 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. PostNet Print & Copy Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 5806-A2 Prosperity Church rd		Amount of Each Disbursement this Period 6.95 Transaction ID : SB17.4653
City Charlotte State NC Zip Code 28269	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	103.70
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 11 OF 14			
	<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	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4649
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 585.00 Transaction ID : SB17.4650
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 500 Tyvola Road		Amount of Each Disbursement this Period 585.00 Transaction ID : SB17.4650.0 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Fundraising Mail Supplis	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3585.00
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 12 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 251.81 Transaction ID : SB17.4642
City Charlotte	State NC	
Purpose of Disbursement Expense Reimbursement	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Costco		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 500 Tyvola Road		Amount of Each Disbursement this Period 101.81 Transaction ID : SB17.4642.0 [MEMO ITEM]
City Charlotte	State NC	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Mecklenburg County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2501 Oxford Place		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.4642.1 [MEMO ITEM]
City Charlotte	State NC	
Purpose of Disbursement Lincoln Day Dinner Registration	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	251.81
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 13 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Charlotte Motor Speedway		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5555 Concord Parkway South		Amount of Each Disbursement this Period 75.00
City Concord	State NC	
Purpose of Disbursement Fundraiser Event Fee		Transaction ID : SB17.4642.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 2530.00
City Charlotte	State NC	
Purpose of Disbursement Fundraising Commission		Transaction ID : SB17.4643
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. SFS Production		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 640 East Rambo Rd		Amount of Each Disbursement this Period 500.00
City Rock Hill	State SC	
Purpose of Disbursement Video Production		Transaction ID : SB17.4662
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3030.00
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 14 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Sprint		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 6391 Sprint Pkwy		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4652
City Overland Park State KS Zip Code 66251	Purpose of Disbursement Phones 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Strategic Impact		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 333 West Vine St Suite 300		Amount of Each Disbursement this Period 1025.00 Transaction ID : SB17.4671
City Lexington State KY Zip Code 40517	Purpose of Disbursement Campaign Marketing 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00 Transaction ID : SB17.4660
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Campaign Consulting 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	4975.00
TOTAL This Period (last page this line number only).....	15553.62