

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 Meadows for Congress

ADDRESS (number and street) PO Box 811 Hendersonville NC 28793 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00503094 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NC 11

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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 04 / 01 / 2020 through M M / D D / Y Y Y Y 06 / 30 / 2020

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 McMichael, Collin, , Signature of Treasurer McMichael, Collin, , [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 01 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Meadows 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))....	.00	1043435.84
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	59344.79
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	.00	984091.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5303.76	706668.08
(b) Total Offsets to Operating Expenditures (from Line 14).....	1195.45	9891.72
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4108.31	696776.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	845764.53	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.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 05/2016)

Write or Type Committee Name

Meadows 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).....	.00	312810.86
(ii) Unitemized.....	.00	531358.05
(iii) TOTAL of contributions from individuals ▶	.00	844168.91
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	199266.93
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	.00	1043435.84
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	13470.59
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1195.45	9891.72
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	.00	8464.85
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1195.45	1075263.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5303.76	706668.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	47577.86
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	11766.93
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	59344.79
21. OTHER DISBURSEMENTS	1000.00	197210.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6303.76	963222.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	850872.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1195.45
25. SUBTOTAL (add Line 23 and Line 24).....	852068.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6303.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	845764.53

**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 type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 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)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Campaign Solutions

Mailing Address 117 N. St. Asaph Street

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 339.75

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2020

Transaction ID : SA14-ER1099

Amount of Each Receipt this Period
 _____ 195.45

Memo Item
 Expenditure Refund

B. Full Name (Last, First, Middle Initial)
PATRIOTS FOR PERRY

Mailing Address PO Box 147

City Red Lion	State PA	Zip Code 17356
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00510164

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2020

Transaction ID : SA14-ER1098

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item
 Expenditure Refund

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

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 1195.45
TOTAL This Period (last page this line number only)..... ▶	_____ 1195.45

**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 6 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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2020		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266	Amount of Each Disbursement this Period 299.49		
Purpose of Disbursement Phone Services		Category/ Type 001	Transaction ID : SB17-EX7438		
Candidate Name		Memo Item Phone Services			
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 06 / 23 / 2020		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266	Amount of Each Disbursement this Period 97.54		
Purpose of Disbursement Phone Services		Category/ Type 001	Transaction ID : SB17-EX7439		
Candidate Name		Memo Item Phone Services			
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. GoGoAir			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2020		
Mailing Address 111 N Canal St.			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Amount of Each Disbursement this Period 49.95		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7424		
Candidate Name		Memo Item Online Services			
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).....▶	446.98
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 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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. GoGoAir			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2020		
Mailing Address 111 N Canal St.			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Amount of Each Disbursement this Period 49.95		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7425		
Candidate Name		Memo Item Online Services			
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. GoGoAir			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2020		
Mailing Address 111 N Canal St.			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Amount of Each Disbursement this Period 49.95		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7426		
Candidate Name		Memo Item Online Services			
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. GoGoAir			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2020		
Mailing Address 111 N Canal St.			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Amount of Each Disbursement this Period 49.95		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7427		
Candidate Name		Memo Item Online Services			
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).....▶	149.85
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 8 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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. GoGoAir		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2020
Mailing Address 111 N Canal St.		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Online Services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 49.95
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:	Transaction ID : SB17-EX7428 <input type="checkbox"/> Memo Item Online Services	

Full Name (Last, First, Middle Initial) B. GoGoAir		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2020
Mailing Address 111 N Canal St.		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Online Services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 49.95
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:	Transaction ID : SB17-EX7429 <input type="checkbox"/> Memo Item Online Services	

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 6659 Falls of Neuse Rd		FEC Identification Number C
City Raleigh	State NC	Zip Code 27615
Purpose of Disbursement Bank Service Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 15.00
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:	Transaction ID : SB17-EX7414 <input type="checkbox"/> Memo Item Bank Service Fee	

SUBTOTAL of Disbursements This Page (optional).....▶	114.90
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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2020		
Mailing Address 6659 Falls of Neuse Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 15.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX7415		
Candidate Name		Memo Item Bank Service Fee			
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. BB&T			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2020		
Mailing Address 6659 Falls of Neuse Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 2.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX7416		
Candidate Name		Memo Item Bank Service Fee			
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. BB&T			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2020		
Mailing Address 6659 Falls of Neuse Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 15.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX7417		
Candidate Name		Memo Item Bank Service Fee			
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).....▶	32.00
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 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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Mitchell, Henry, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2020		
Mailing Address 211 Onteora Blvd			FEC Identification Number C		
City Asheville	State NC	Zip Code 28803	Amount of Each Disbursement this Period 2300.00		
Purpose of Disbursement Management Consulting		Category/ Type 001	Transaction ID : SB17-EX7430		
Candidate Name		Memo Item Management Consulting			
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. Campaign Solutions			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2020		
Mailing Address 117 N. St. Asaph Street			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 514.69		
Purpose of Disbursement Online/Email Services		Category/ Type 001	Transaction ID : SB17-EX7418		
Candidate Name		Memo Item Online/Email Services			
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. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2020		
Mailing Address 300 First Street SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 358.58		
Purpose of Disbursement Food/Beverage		Category/ Type 001	Transaction ID : SB17-EX7419		
Candidate Name		Memo Item Food/Beverage			
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).....▶	3173.27
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 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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Tower Digital Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2020	
Mailing Address 685 Club Drive			FEC Identification Number C	
City Athens	State GA	Zip Code 30607	Amount of Each Disbursement this Period 99.90	
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7433	
Candidate Name			<input type="checkbox"/> Memo Item Online Services	
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. Tower Digital Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2020	
Mailing Address 685 Club Drive			FEC Identification Number C	
City Athens	State GA	Zip Code 30607	Amount of Each Disbursement this Period 99.90	
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7434	
Candidate Name			<input type="checkbox"/> Memo Item Online Services	
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. Tower Digital Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2020	
Mailing Address 685 Club Drive			FEC Identification Number C	
City Athens	State GA	Zip Code 30607	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7435	
Candidate Name			<input type="checkbox"/> Memo Item Online Services	
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).....▶	299.80
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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Tower Digital Inc.			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2020		
Mailing Address 685 Club Drive			FEC Identification Number C		
City Athens	State GA	Zip Code 30607	Amount of Each Disbursement this Period 99.90		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7436		
Candidate Name		Memo Item Online Services			
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. Safeway Store			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2020		
Mailing Address 490 L Street NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 601.02		
Purpose of Disbursement Food/Beverage		Category/ Type 001	Transaction ID : SB17-EX7432		
Candidate Name		Memo Item Food/Beverage			
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. Trail Blazer Campaign Services Inc.			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2020		
Mailing Address 620 Mendelssohn Ave N Suite 186			FEC Identification Number C		
City Golden Valley	State MN	Zip Code 55437	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Software		Category/ Type 001	Transaction ID : SB17-EX7437		
Candidate Name		Memo Item Software			
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).....▶	850.92
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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. 101domain			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2020		
Mailing Address 5858 Edison Place			FEC Identification Number C		
City Carlesbad	State CA	Zip Code 92008	Amount of Each Disbursement this Period 28.33		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7412		
Candidate Name		Memo Item Online Services			
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. 101domain			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2020		
Mailing Address 5858 Edison Place			FEC Identification Number C		
City Carlesbad	State CA	Zip Code 92008	Amount of Each Disbursement this Period 133.66		
Purpose of Disbursement Online Services		Category/ Type 001	Transaction ID : SB17-EX7413		
Candidate Name		Memo Item Online Services			
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			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
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).....▶	161.99
TOTAL This Period (last page this line number only).....▶	5229.71

**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)

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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PAGE 14 OF 14

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Committee to Elect Bob Penland Nc Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 678

City Candler State NC Zip Code 28715

Purpose of Disbursement Non-Federal Contribution 011 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 06 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21-EX7420

Memo Item Non-Federal Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00