Image# 12951378056 PAGE 1 / 23

### **FEC** FORM 3Y

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

FORIWI 3X	or Other Than An Au	thorized Committe	ee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	ng, type	12FE4M5	
North Carolina Medical	Society Federal Po	litical Education	and Actic	on Commit	ttee
ADDRESS (number and street)	PO Box 25834				
Check if different	222 N. Person Street				
than previously reported. (ACC)	Raleigh			NC L	27611
2. FEC IDENTIFICATION NU	MBER ▼ CI	TY▲	S	STATE A	ZIP CODE ▲
C C00003152			NEW N) <b>OR</b>	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	Report Due On:		May 20 (M5)	-	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Ma	ur 20 (M3)	Jun 20 (M6)	Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q	1)		Jul 20 (M7)	. —	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	2) (c) 12-Day PRE-Election Report for the:	Primary (12F		General (	
October 15 Quarterly Report (Q	·			oposiui (	
January 31 Year-End Report (Y	E) Electi	ion on	D D /		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (300	ā)	Runoff (3	Special (30S)
Termination Report (TER)		ion on/	D D /	Y	in the State of
5. Covering Period 01	01 2012	through	03	/ 31 /	2012
I certify that I have examined the	s Report and to the best o	of my knowledge and I	belief it is true	e, correct and	d complete.
Type or Print Name of Treasurer	Asst Treasurer Stephen W	/. Keene			
Signature of Treasurer Asst 7	reasurer Stephen W. Keene	[Electronically	y Filed] D	ate 04	12 / 2012
NOTE: Submission of false, errone	eous, or incomplete information	on may subject the pers	son signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### North Carolina Medical Society Federal Political Education and Action Committee

03 2012 Report Covering the Period: 2012 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33516.15 January 1, 2012 (b) Cash on Hand at 33516.15 Beginning of Reporting Period..... 20156.36 20156.36 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 53672.51 53672.51 6(a) and 6(c) for Column B)..... 35250.00 35250.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 18422.51 18422.51 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### 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 3X (Rev. 06/2004)

Write or Type Committee Name

#### North Carolina Medical Society Federal Political Education and Action Committee

Re	port Covering the Period: From:	01 2012	To: 03 / 31 / 2012					
	I. Receipts	I. Receipts COLUMN A Total This Period						
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other							
	Than Political Committees (i) Itemized (use Schedule A)	9400.00	9400.00					
	(ii) Unitemized(iii) TOTAL (add	6750.00	6750.00					
	Lines 11(a)(i) and (ii)	16150.00	16150.00					
	(b) Political Party Committees	0.00	0.00					
	(such as PACs)(d) Total Contributions (add Lines	4000.00	4000.00					
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	20150.00	20150.00					
12.	Party Committees	0.00	0.00					
13.	All Loans Received	0.00	0.00					
	Loan Repayments Received  Offsets To Operating Expenditures	0.00	0.00					
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	2.00	2.00					
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00					
	(Dividends, Interest, etc.)	4.36	4.36					
	(from Schedule H3)	0.00	0.00					
	(b) Levin Funds (from Schedule H5)	0.00	0.00					
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	20156.36	20156.36					
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	20156.36	20156.36					

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period				
	Operating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date			
	(i) Federal Share	0.00	0.00			
	(ii) Non-Federal Share	0.00	0.00			
(	b) Other Federal Operating	7 7				
	Expenditures	0.00	0.00			
(	c) Total Operating Expenditures					
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00			
	Fransfers to Affiliated/Other Party	0.00	0.00			
3. (	Contributions to					
6	Federal Candidates/Committees and Other Political Committees	0.00	0.00			
	ndependent Expenditures	0.00				
5.	use Schedule E)	0.00	0.00			
(	2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00			
(	use scriedule r)	7 7	3.00			
6. L	oan Repayments Made	0.00	0.00			
7. L	oans Made	0.00	0.00			
	a) Individuals/Persons Other	0.00	0.00			
	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 28(a), (b), and (c))▶	0.00	0.00			
9. (	Other Disbursements	35250.00	35250.00			
n F	Federal Election Activity (2 U.S.C. §431(20))					
	a) Allocated Federal Election Activity					
•	(from Schedule H6)					
	(i) Federal Share	0.00	0.00			
	(ii) III assiall Objects	0.00	0.00			
(	(ii) "Levin" Shareb) Federal Election Activity Paid Entirely	0.00	7 7 7			
(	With Federal Funds	0.00	0.00			
(	c) Total Federal Election Activity (add					
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
1 7	Total Disbursements (add Lines 21(c), 22,					
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35250.00	35250.00			
	25, 2., 25, 25, 27, 25(a), 25 and 55(5))	30250.00	33230.00			
2. 1	Total Federal Disbursements					
	subtract Line 21(a)(ii) and Line 30(a)(ii)	2222	0,000			
f	rom Line 31)▶	35250.00	35250.00			

#### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 20150.00 20150.00 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 20150.00 20150.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b)) ........▶ 37. Offsets to Operating Expenditures 2.00 2.00 (from Line 15, page 3)..... 38. Net Operating Expenditures -2.00 -2.00 (subtract Line 37 from Line 36) .....

FOF	OR LINE NUMBER:					6	OF	23
(che	ck only	or	ne)					
X	11a		11b		11c	12	2	
	13		14		15	16	6	17

,	Federal Political Education and	Action Committee
Full Name (Last, First, Middle Initial) Dr. George Anthony Alsina  Mailing Address 18 Bahama Drive		Date of Receipt
	7.0.1	03 19 2012
City Wrightsville Beach	State Zip Code NC 28480	Transaction ID : SA11AI.14534
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  1000.00
Name of Employer  Port City Neurosurgery & Spine  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  1000.00	Voluntary member contribution
Full Name (Last, First, Middle Initial) Sandra Brown Mailing Address 201 LePhillip Court, NE		Date of Receipt
City Concord	State Zip Code NC 28025	Transaction ID : SA11Al.14539  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00  Voluntary member contribution
Name of Employer Cabarrus Eye Center	Occupation Physician	Voluntary member contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Craig Burkhart  Mailing Address 410 Market Street		Date of Receipt
Ste 400 City Chapel Hill	State Zip Code NC 27516	02 02 2012 Transaction ID : SA11AI.14426
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	Voluntary member contribution
UNC Dermatology at Southern Vi Receipt For:  Primary General Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

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

		NUMBER	:	PAGE	=	7	OF	23
(cl	neck only	/ one)						
[	<b>X</b> 11a	11b		11c		12		
	13	14		15		16		17

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) North Carolina Medical Society Federal Political Education and Action Committee Full Name (Last, First, Middle Initial) Jeffrey Byrnett Date of Receipt Mailing Address 1041 Kirkpatrick Road, Ste 150 2012 City Zip Code State Transaction ID: SA11AI.14431 NC Burlington 27215 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Physician Alamance Surgical Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Anthony Joseph Christiano Jr. Date of Receipt Mailing Address 850 WH Smith Boulevard 03 01 2012 City State Zip Code Transaction ID: SA11AI.14473 NC Greenville 27834 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Vidant Cardiology, PA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Adam N Clark Date of Receipt Mailing Address 850 WH Smith Boulevard 03 01 2012 City State Zip Code Transaction ID: SA11AI.14474 NC Charlotte 27834 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Voluntary member contribution Name of Employer Occupation Physician Vidant Cardiology Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

FOF	FOR LINE NUMBER:					8	OF	23
(che	ck only	or	ne)					
X	11a		11b		11c	12	2	
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NAME OF COMMITTEE (In Full)  North Carolina Medical Society	e name and address of any political committee	
Full Name (Last, First, Middle Initial)  A. Reza E Ershadi		Date of Receipt
Mailing Address 850 WH Smith Boulevard		01 03 2012
City	State Zip Code	Transaction ID : SA11AI.14353
Greenville	NC 27834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Coastal Carolina Cardiology	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	, 199, 09000 Tour to Date \$	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  George Escaravage		Date of Receipt
Mailing Address 1120 Medical Center Drive		M M / D D / Y Y Y Y
City	State Zip Code	02 27 2012
City	NC 28401	Transaction ID : SA11AI.14452
Wilmington	20401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Coastal Carolina Eye Clinic	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Dr. Gary U. Fontana		Date of Receipt
Mailing Address 850 WH Smith Boulevard		03 01 2012
City	State Zip Code	Transaction ID : SA11AI.14476
Greenville	NC 27834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Vidant Cardiology, PA	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	7.99.094.0 Total to Edito ¥	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	only)	

FOF	FOR LINE NUMBER:					9	OF	23
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X	11a		11b		11c	12	2	
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  North Carolina Medical Society	/ Federal Political Education and A	Action Committee
Full Name (Last, First, Middle Initial)  1. Dr. Brian Mingtao Go		Date of Receipt
Mailing Address 1037 Stradshire Drive		03 05 2012 .
City Raleigh	State Zip Code NC 27614	Transaction ID : SA11AI.14478  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  Raleigh Cardiology Associates, PA  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Voluntary member contribution
Full Name (Last, First, Middle Initial)  Dr. James Bryan Hall  Mailing Address 1025 Morehead Medical Driv	ve, 6th F	Date of Receipt
City	State Zip Code	01 23 2012 Transaction ID : SA11AI.14404
Charlotte	NC 28204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Blumental Cancer Center-GYN On	Occupation Physician	Voluntary member contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Derrick Gerard Hickey		Date of Receipt
Mailing Address 6101 Old Branch Road		03 12 2012
City Wilmington	State Zip Code NC 28409	Transaction ID : SA11Al.14479  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Port City Orthopaedics Receipt For:	Physician	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	750.00
TOTAL This Period (last page this line numbe	r only)	

	R LINE NUMBER: PAGE 10 OF 23							
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NAME OF COMMITTEE (In Full)  North Carolina Medical Society	re name and address of any political committee of Federal Political Education and A	
Full Name (Last, First, Middle Initial) Dr. Michael George Hitchcock  Mailing Address 3195 Maplewood Ave Ste 102  City Winston-Salem  FEC ID number of contributing federal political committee.  Name of Employer  Cutaneous Pathology  Receipt For:	State Zip Code NC 27103  C Occupation Physician	Date of Receipt  03 19 2012  Transaction ID: SA11AI.14542  Amount of Each Receipt this Period  250.00  Voluntary member contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Charles B. Jones  Mailing Address 850 WH Smith Boulevard	Chaha Zin Cada	Date of Receipt  O1 11 2012
City  Greenville  FEC ID number of contributing federal political committee.	State Zip Code NC 27834	Transaction ID : SA11AI.14354  Amount of Each Receipt this Period  250.00
Name of Employer  Coastal Carolina Cardiology  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Voluntary member contribution
Full Name (Last, First, Middle Initial) Dr. Kevin James Kerlin Mailing Address 2802 McLamb Place  City Goldsboro	State Zip Code NC 27534-1600	Date of Receipt  03 15 2012  Transaction ID: SA11AI.14481  Amount of Each Posciet this Period
FEC ID number of contributing federal political committee.  Name of Employer  Wayne Radiation Oncology  Receipt For:  Primary  General  Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  500.00	Amount of Each Receipt this Period  500.00  Voluntary member contribution
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numbe		

FOR LINE NUMBER:					PAGE	1	11	OF		23
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Any information copied from such Reports and So or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Medical Society	Federal Political Education and Ad	ction Committee
Full Name (Last, First, Middle Initial) Shaukat Khan		Date of Receipt
Mailing Address 2905 Crouse Lane		01 30 / Y Y Y Y Y
City	State Zip Code NC 27215	Transaction ID : SA11AI.14410
Burlington	NC 27215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Alliance Medical Associates	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  David J. Koenig	Date of Receipt	
Mailing Address PO Box 139		M = M / D = D / Y = Y = Y
City	State Zip Code	02 22 2012 Transaction ID : SA11AI.14459
Supply	NC 28462	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Brunswick Community Hospital	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. David Edwin Manthey		Date of Receipt
Mailing Address Medical Center Boulevard		01 13 2012
City	State Zip Code	Transaction ID : SA11AI.14395
Winston-Salem	NC 27157-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Wake Forest University Physicians	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number of	only)	

TOTT EITHE TOMBETT.					PAGE	_ ′	12	OF	23
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>	11a		11b		11c		12		
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) North Carolina Medical Society	Federal Political Education and A	ction Committee
Full Name (Last, First, Middle Initial) Sean Murphy  Mailing Address 1417 Alexander Lane		Date of Receipt  M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
City Trent Woods	State Zip Code NC 28562	Transaction ID : SA11AI.14484
FEC ID number of contributing federal political committee.  Name of Employer  Dermatology Associates of Coas  Receipt For:	Occupation Physician	Amount of Each Receipt this Period  250.00  Voluntary member contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  William J Noell  Mailing Address 949 Fairview Road		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.14380
Sylva	NC 28779	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer  Mountain Medical & Surgical Gr	Occupation Physician	Voluntary member contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  C. Jay R Parikh		Date of Receipt
Mailing Address 721 Tilghman Drive Suite 100		01
City Dunn	State Zip Code NC 28344	Transaction ID : SA11AI.14415  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluintary member contribution
Orthopaedic Solutions & Sports	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u>_</u> _	900.00

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

FOR LINE NUMBER:						PAGE	 13	OF	23	
	(c	che	ck only	or	ne)					
		X	11a		11b		11c	12		
			13		14		15	16		17

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 add	ress of any political cor	mmittee to s	olicit contributions from such committee.
NAME OF COMMITTEE North Carolina N	ledical Society I	ederal Po	litical Education	and Act	ion Committee
Full Name (Last, First, Na. Dr. Jayesh Kanchar Mailing Address 850 WH	nlal Patel				Date of Receipt
City Greenville		State NC	Zip Code 27834		01 03 2012  Transaction ID : SA11AI.14355  Amount of Each Receipt this Period
FEC ID number of contr federal political committee	•	С			250.00
Name of Employer  Coastal Carolina Cardiolo  Receipt For:	ogy, PA	Occupation Physician Aggregate Ye	ar to Date 🔻		Voluntary member contribution
	General	Aggregate re	ar-to-Date <b>▼</b> 250.	.00	
Full Name (Last, First, Manager Paul C. Perlik Mailing Address 1915 Ra	,		Date of Receipt		
City Charlotte		State NC	Zip Code 28207-1101		03 05 2012 Transaction ID : SA11AI.14485  Amount of Each Receipt this Period
federal political committe					500.00 Voluntary member contribution
Name of Employer OrthoCarolina Receipt For:		Occupation Physician	au ta Data 🕶		voluntary member contribution
	General	Aggregate Ye	ar-to-Date ▼ 500.	.00	
Full Name (Last, First, No. Dr. Timothy John	Reeder				Date of Receipt
Mailing Address Emerge 3ED-34 City	ency Medicine PCMH 6 600 Moye Boulevard	State	Zip Code		02 03 2012 Transaction ID : SA11Al.14444
Greenville FEC ID number of contr	ibuting	NC	27858-4354		Amount of Each Receipt this Period 500.00
federal political committee  Name of Employer	e.	Occupation			Voluntary member contribution
Brody School of Medicine Receipt For:	e at ECU	Physician Aggregate Ye	ar-to-Date ▼		
Primary	General		500	.00	
SUBTOTAL of Receipts TI	nis Page (optional)			······ <b>&gt;</b>	1250.00
TOTAL This Period (last p	age this line number of	only)		······ <b>&gt;</b>	

FOR LINE NUMBER:					PAGE	1	14	OF		23
(check only one)										
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	13	15		16	;		17			

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	v Fodovol Political File vita and the	otion Committee
/ Νοπη Carolina Medical Societ	y Federal Political Education and A	Action Committee
Full Name (Last, First, Middle Initial)  Dr. Louise Cree Rogers		Date of Receipt
Mailing Address 1918 Randolph Road		M = M / D = D / Y = Y = Y
Suite 300 City	State Zip Code	02 27 2012 Transaction ID : SA11AI.14470
Charlotte	NC 28207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Presbyterian Women's Care	Occupation Physician	Voluntary member contribution
Receipt For:	Pnysician  Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  3. Dr. Jerry Allen Simpson		Date of Receipt
Mailing Address 850 WH Smith Boulevard		M M / D D / Y Y Y Y Y
City	State Zip Code	03 01 2012 Transaction ID : SA11AI.14489
Greenville	NC 27834	Transaction ID: SA11AI.14489  Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Vidant Cardiology, PA	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		
Dr. Brian Edward Smith		Date of Receipt
Mailing Address 8 Medical Park Drive		01 17 2012
City Asheville	State Zip Code NC 28803-2493	Transaction ID : SA11AI.14421
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluintary member contribution
Asheville Eye Associates, PLLC	Physician	-
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
or riosorpto Tillo Faye (uptional).		
TOTAL This Period (last page this line number	er only)	

FOF	PAGE	. ′	15	OF		23			
(check only one)									
×	11a	11b		11c		12			
	13	15		16			17		

	the name and address of any political committee t						
NAME OF COMMITTEE (In Full) North Carolina Medical Socie	ty Federal Political Education and A	Action Committee					
Full Name (Last, First, Middle Initial)  Dr. Michael Kevin Smith  Mailing Address 850 WH Smith Boulevard		Date of Receipt  O1 20 2012					
City	State Zip Code	Transaction ID : SA11AI.14422					
Greenville FEC ID number of contributing	NC 27834-3761	Amount of Each Receipt this Period					
federal political committee.	tederal political committee.						
Name of Employer  Coastal Carolina Cardiology, PA	Occupation Physician	Voluintary member contribution					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00						
Full Name (Last, First, Middle Initial)  3. Dr. Joshua Ian Vogel	Date of Receipt						
Mailing Address 1802 South 17th Street	03 20 2012						
City Wilmington	State Zip Code NC 28401	Transaction ID : SA11AI.14547					
FEC ID number of contributing federal political committee.	C 20401	Amount of Each Receipt this Period					
Name of Employer Wilmington Health Associates, PLLC	Occupation Physician	Voluntary member contribution					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00						
Full Name (Last, First, Middle Initial)  Dr. Charles Edward Williams		Date of Receipt					
Mailing Address 236 Butternut Lane		02 06 2012					
City Clayton	State Zip Code NC 27520	Transaction ID : SA11AI.14447  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	Voluntary member contribution					
Horizon Family Medicine, PA							
Receipt For:	Aggregate Year-to-Date ▼						
Primary General  Other (specify) ▼	250.00						
SUBTOTAL of Receipts This Page (optional)		750.00					
TOTAL This Period (last page this line numb	per only)	9400.00					

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 OF 23 (check only one)  11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) North Carolina Medical Society Federal	Political Education and A	Action Committee
Name of Employer  Receipt For:  Primary  Other (specify)   Aggregate	Zip Code 27704	Date of Receipt  03 16 2012  Transaction ID: SA11C.14530  Amount of Each Receipt this Period  4000.00  Contribution
Full Name (Last, First, Middle Initial)  Address		Date of Receipt
City State	Zip Code	

City **DURHAM** FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) B. Mailing Address City Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional)..... 4000.00 TOTAL This Period (last page this line number only).....

S	CHEDULE B (FEC Form 3X)			FOR LINE	E NUMBER: PAGE 17 OF 23			
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			Summary Page	21b	22 23 28a 28b	24 25 26 28c × 29 30b		
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	for commercial purposes, other than using the nam							
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	North Carolina Medical Society Fed	deral Po	litical Educa	ation and A	ction Committe	ee		
<u></u>	Full Name (Last, First, Middle Initial)							
A.					Date of Disburser	ment		
	Moiling Address 202 CALCOT C				M M / D I			
	Mailing Address 200 OAK ST 3				03 23	2012		
	,	State	Zip Code		Transaction ID :	· SR20 14402		
	High Point	NC	27260		TTATISACTION ID :	. 3023.14433		
	Purpose of Disbursement Primary contribution-NC House			· · · ·	Amount of Each I	Disbursement this Period		
	Candidate Name			Category/	2			
				Type		2000.00		
	Office Sought: House Disbursen							
	Senate President	Primary Other (spec	General					
	State: District:	Other (spec	∪iiy <i>)</i> ▼					
_	Full Name (Last, First, Middle Initial)							
В.	Harold Brubaker				Date of Disburser	ment		
	Marking Address are a second				M = M / D = 1			
	Mailing Address 215 Back Creek Church Road		03 23	3 2012				
	City		Transaction ID	: SB29.14494				
	Asheboro Purpose of Disbursement							
	Primary contribution-NC House				Amount of Each Disbursement this Period			
	Candidate Name			Category/		2000.00		
	Office Sought: House Bishings	nont For:		Type		2000.00		
	Office Sought: House Disbursen Senate	nent For: Primary	General					
		Other (spec						
	State: District:		•					
_	Full Name (Last, First, Middle Initial)							
C.	Jeff Collins				Date of Disburser			
	Mailing Address 1109 CULPEPPER DR				03 23			
	,	State NC	Zip Code 27803		Transaction ID	: SB29.14497		
	Purpose of Disbursement	140	21003					
	Primary contribution-NC House				Amount of Each [	Disbursement this Period		
	Candidate Name	Candidate Name				1000.00		
	Office Sought: House Disbursen	nent For:		Туре		1000.00		
		Primary	General					
	President	Other (spec						
_	State: District:		<u> </u>					
	·					5000.00		
s	UBTOTAL of Disbursements This Page (optional)			·····•		5000.00		
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 18 OF 23
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only	one)		
			Summary Page	21b	22 23 28a 28b	24 25 26 28c X 29 30b
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	for commercial purposes, other than using the nam					
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	North Carolina Medical Society Fed	deral Po	olitical Educa	ation and A	ction Commit	tee
_	Full Name (Last, First, Middle Initial)					
Α.	James Crawford	Date of Disburse				
	Mailing Address 509 College Street				03 2	23 2012
	City	State	Zip Code		Transaction ID	) · SR20 14408
	Oxford	NC	27565		Transaction is	7. OD23.14430
	Purpose of Disbursement Primary contribution-NC House				Amount of Each	Disbursement this Period
	Candidate Name			Category/		2000.00
	Office Sought: House Disburser	nant Fari		Туре		2000.00
	Office Sought: House Disburser Senate	Primary	General			
	President	Other (spec	cify) 🔻			
	State: District:					
_	Full Name (Last, First, Middle Initial)				D (D) .	
В.	Leo Daughtry				Date of Disburse	
	Mailing Address 5 Lakeview Place				03 2	23 2012
	Smithfield	State NC	Zip Code 27577		Transaction ID	) : SB29.14499
	Purpose of Disbursement Primary contribution-NC House				Amount of Each	Disbursement this Period
	Candidate Name			Category/		1000.00
	Office Sought: House Disbursen	nont For:		Туре		1000.00
	Senate Dispulser	Primary	General			
	President	Other (spec				
_	State: District:					
_	Full Name (Last, First, Middle Initial)				Data of Diabura	am ant
C.	Danny Davis				Date of Disburse	
	Mailing Address PO BOX 196					23 2012
	City	State	Zip Code			
	Waynesville	NC	28786		Transaction ID	) : SB29.14502
	Purpose of Disbursement Primary contribution-NC House					5
	Candidate Name			Category/ Type	Amount of Each	Disbursement this Period 2000.00
	Office Sought: House Disburser	nent For:		71	,	
	Senate	Primary	General			
	President	Other (spec	cify) 🔻			
_	State: District:					
s	SUBTOTAL of Disbursements This Page (optional)			·····•		5000.00
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 19 OF 2		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
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Any information copied from such Reports and State	mants may not be sold or use				
or for commercial purposes, other than using the nati					
NAME OF COMMITTEE (In Full)					
North Carolina Medical Society Fe	deral Political Educa	ition and A	ction Committee		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. Jerry Dockham	Jerry Dockham				
Mailing Address 849 Old Camp Road			03 23 2012		
City	State Zip Code		Transaction ID : SB29.14503		
Denton	NC 27239		Hallsaction in . 3023.14303		
Purpose of Disbursement Primary contribution-NC House			Amount of Each Disbursement this Period		
Candidate Name		Category/	3750.00		
Office Sought: House Disburse	ment For:	Туре			
Senate Stagnic Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			Data of Dishawaanant		
B. James Fulghum	Date of Disbursement				
Mailing Address 400 Keisler Drive	03 23 2012				
City Cary	State Zip Code NC 27518		Transaction ID : SB29.14507		
Purpose of Disbursement Primary contribution-NC House		· · · ·	Amount of Each Disbursement this Period		
Candidate Name		Category/			
		Type	4000.00		
	ment For:				
Senate President	Primary General  Other (specify) ▼				
State: District:	Canon (openny)				
Full Name (Last, First, Middle Initial)					
C. Mitch Gillespie			Date of Disbursement		
Mailing Address 185 CROSS CREEK NORTH RIDGE DR			03 23 2012		
City Marion	State Zip Code NC 28752		Transaction ID: SB29.14506		
Purpose of Disbursement					
Primary contribution-NC House	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	1000.00		
Office Sought: House Disburse	ment For:	Type			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
CURTOTAL of Dishurance and This David (1911)			8750.00		
SUBTOTAL of Disbursements This Page (optional).		······	2.30.00		
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SCHEDULE B (FEC Form 3X)	Llea caparata achadula(=)	FOR LINE NUMBER: PAGE 20 OF 23			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	22 23 24 25 26		
		27	28a 28b 28c X 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
North Carolina Medical Society Fed	deral Political Educa	ition and Ad	ction Committee		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. Ken Goodman	Ken Goodman				
Mailing Address 832 WILLIAMSBURG DRIVE	03 23 2012				
•	State Zip Code		Transaction ID : SB29.14510		
Rockingham Purpose of Disbursement	NC 28379				
Primary contribution-NC House			Amount of Each Disbursement this Period		
Candidate Name		Category/	3000.00		
Office Sought: House Disbursen	nent For:	Туре			
	Primary General				
	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)  B. Dr. Peter Tanner Hurley			Date of Disbursement		
Di. Feter failler nulley			M M / D D / Y Y Y Y		
Mailing Address 214 18th Street SE		03 23 2012			
Hickory	State         Zip Code           NC         28602-1363		Transaction ID : SB29.14511		
Purpose of Disbursement Primary contribution-NC House			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	1000.00		
Office Sought: House Disbursen	nent For:	.,,,,,	, ,		
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. Jonathan Jordan			Date of Disbursement		
Mailing Address PO BOX 744			03 23 7 2012		
City	State Zip Code		Transaction ID - CD00 44545		
Jefferson	NC 28640		Transaction ID : SB29.14515		
Purpose of Disbursement Primary contribution-NC House			Assessment of Early Dichesses and this Decire		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period  1000.00		
Office Sought: House Disbursen	nent For:	- 21			
	Primary General				
	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)		··················· <b>&gt;</b>	5000.00		
TOTAL This Period (last page this line number only)					

for each category of the Detailed Summary Page    21b   22   23   24   25   30b   30b   26   27   30b   3	S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 21 OF 23
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)  North Carollina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Marvin Lucas  Mailing Address 3318 Hedgemoor Circle  City State Zip Code Spiring Lake NC 28390  Purpose of Disbursement Primary contribution NC House Candidate Name  Category/ District:  Full Name (Last, First, Middle Initial)  Schuck McGrady  Mailing Address PO BOX 723  City State Zip Code Hendersonville NC 28783  Purpose of Disbursement Primary contribution NC House Candidate Name  Category/ Type  Transaction ID : SB29.14519  Date of Disbursement District:  Full Name (Last, First, Middle Initial)  B. Chuck McGrady  Mailing Address PO BOX 723  City State Zip Code Roc 28783  Transaction ID : SB29.14519  Amount of Each Disbursement Primary contribution-NC House Candidate Name  Category/ Types  Transaction ID : SB29.14519  Date of Disbursement District:  Full Name (Last, First, Middle Initial)  Date of Disbursement District:  Tim Moore  Mailing Address S05 East King St.  City State Zip Code NC 28086  Transaction ID : SB29.14520  Amount of Each Disbursement District:  Transaction ID : SB29.14520  Amount of Each Disbursement District:  Transaction ID : SB29.14520  Amount of Each Disbursement District:  Transaction ID : SB29.14520  Amount of Each Disbursement Disbursement District:  Transaction ID : SB29.14520  Amount of Each Disbursement Disburs	ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only	one)		
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 in solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Marvin Lucas  Mailling Address 3318 Hedgemoor Circle  City Spring Lake NC 28390  Purpose of Disbursement Primary contribution-NC House  Candidate Name  Category/ State: Primary General  Primary Category/ State: Primary Category/ Type  Date of Disbursement this Period  Category/ Type  Transaction ID : \$829.14516  Amount of Each Disbursement  Primary contribution-NC House  Category/ Type  Transaction ID : \$829.14519  Amount of Each Disbursement  Primary contribution-NC House  Category/ Type  Office Sought: House President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. Tim Moore  Mailing Address 306 East King St.  City State Zip Code NC 28086  Purpose of Disbursement Primary General  District: Primary General  Other (specify) ▼  Transaction ID : \$829.14519  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : \$829.14519  Transaction ID : \$829.14520  Amount of Each Disbursement Disbursement For:  City State: District: Primary General  Disbursement For:  Primary Contribution-NC House  Candidate Name  Category/ Office Sought: House Primary General  Disbursement For:  Primary General  Other (specify) ▼  Transaction ID : \$829.14520  Transaction ID : \$829.14520  Transaction ID : \$829.14520							
NAME OF COMMITTEE (In Full) North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Marvin Lucas  Mailing Address 3318 Hedgemoor Circle  City State Zip Code Spring Lake NC 28390  Purpose of Disbursement Primary or Control State:  Date of Disbursement In State:  Disbrict:  Full Name (Last, First, Middle Initial)  Chuck McGrady  Mailing Address PO BOX 723  City State Zip Code NC 28793  Primary or Control Disbursement For:  Senate President Primary or Control Disbursement For:  Senate Primary Or Control Disbursement For:  City State: Disbursement For:  Senate Primary General  Disbursement For:  Senate P	۸r	by information copied from such Paparts and Staten	onte may i	not be cold or us			
North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Marvin Lucas  Mailing Address 3318 Hedgemoor Circle  City State Zip Code Spring Lake NC 28390  Purpose of Disbursement Primary or Unitrotion-NC House  Candidate Name  Category' Type  Office Sought: House Disbursement For:  Category' Disbursement For:  Cardidate Name  Category' Disbursement For:  Candidate Name  Category' Type  Office Sought: House Disbursement For:  Candidate Name  Category' Disbursement For:  Senate Primary Cortribution-NC House  Candidate Name  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement this Period  Candidate Name  Category' Type  Date of Disbursement this Period  Candidate Name  Category' Type  Date of Disbursement this Period  Category' Type  Transaction ID : \$829.14520  Amount of Each Disbursement this Period  Category' Type  Transaction ID : \$829.14520  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Transaction ID : \$829.14520  Amount of Each Disbursement this Period  Category' Type  Disbursement For:  City State:  City State:  Disbursement For:  City State:  City State:  City State:  City State:  C							
A. Marvin Lucas  Malling Address 3318 Hedgemoor Circle  City Spring Lake NC 28390  Purpose of Disbursement Primary contribution-NC House  Candidate Name  Category'  City Senate President State Disbursement Primary Category'  Mailing Address PO BOX 723  City State Zip Code NC 28390  Office Sought: House Disbursement For: Senate Primary Category'  Full Name (Last, First, Middle Initial)  B. Chuck McGrady  Mailing Address PO BOX 723  City State Zip Code NC 28793  Purpose of Disbursement Primary Contribution-NC House  Candidate Name  Category'  Office Sought: House Disbursement For: Senate Primary General Primary Contribution-NC House  Candidate Name  Category'  Transaction ID : SB29.14519  Amount of Each Disbursement this Period  Category'  Zip Code NC 28793  Transaction ID : SB29.14520  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category' Type  Code NC 28086  Purpose of Disbursement Primary Contribution-NC House  Candidate Name  City Sing Mountain NC 28086  Purpose of Disbursement Primary Contribution-NC House  Candidate Name  City Sing Mountain NC 28086  Purpose of Disbursement Primary Contribution-NC House  Candidate Name  Cotegory' Type  Cother (specify) ▼  Cotegory' Type  Cother (specify) ▼  Category' Type  Cother (specify) ▼  Category' Type  Category' Type  Cother (specify) ▼  Category' Type  Cother (specify) ▼  Cother (specify) Type  Co	$\setminus$	NAME OF COMMITTEE (In Full)					
Malling Address 318 Hedgemoor Circle  City Spring Lake NC 28390 Purpose Of Disbursement Primary contribution-NC House Candidate Name  City Spring Lake NC 28390  Office Sought: House President State: Disbursement Primary General Primary Contribution-NC House Candidate Name  City Share President State: Disbursement Primary General Purpose of Disbursement Primary Contribution-NC House Candidate Name  Category'  Transaction ID : SB29.14516  Amount of Each Disbursement this Period  Transaction ID : SB29.14519  Transaction ID : SB29.14519  Date of Disbursement  Date of Disbursement  Transaction ID : SB29.14519  Transaction ID : SB29.14519  Transaction ID : SB29.14519  Amount of Each Disbursement this Period  Category' Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Date of Disbursement this Period  Category' Type  Date of Disbursement this Period  Transaction ID : SB29.14520	$ \rangle$	North Carolina Medical Society Fed	deral Po	litical Educa	ation and A	ction Commit	tee
Mailing Address 3318 Hedgemoor Circle	_	•					
Mailing Address 3318 Hedgemoor Circle  City Spring Lake Primary contribution-NC House Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) B. Chuck McGrady  Mailing Address PO BOX 723  City House Candidate Name  Category/ Mailing Address PO Box 723  City Hondersonville Primary Contribution-NC House Candidate Name  Category/  Office Sought:  Full Name (Last, First, Middle Initial) B. Chuck McGrady  Mailing Address PO BOX 723  City Hondersonville Primary contribution-NC House Candidate Name  Category/ Office Sought:  Full Name (Last, First, Middle Initial) Candidate Name  Category/ Office Sought:  Full Name (Last, First, Middle Initial) State:  Disbursement For: Senate Primary General Other (specify)  Transaction ID: SB29.14519  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Transaction ID: SB29.14520  Transaction ID: SB29.14520  Amount of Each Disbursement  Primary Contribution-NC House  Category/ Transaction ID: SB29.14520  Amount of Each Disbursement  Primary Contribution-NC House  Category/ Types  Category/ Type  C	A.	Marvin Lucas					
Spring Lake Purpose of Disbursement Primary contribution-NC House Candidate Name  Office Sought: House Senate Priseident State: District:  Full Name (Last, First, Middle Initial) B. Chuck McGrady  Mailing Address PO BOX 723  City State Zip Code Hendersonville Name Category/ Type  Transaction ID : \$829.14516  Amount of Each Disbursement this Period  Date of Disbursement  Mailing Address PO BOX 723  Transaction ID : \$829.14516  Amount of Each Disbursement  Mailing Address PO BOX 723  Transaction ID : \$829.14519  Date of Disbursement  Mailing Address PO BOX 723  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : \$829.14519  Date of Disbursement  Mailing Address PO BOX 723  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Amount of Each Disbursement this Period  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Transaction ID : \$829.14519  Amount of Each Disbursement  Mailing Address 305 East King St.  City State Zip Code  Kings Mountain NC 28086  Purpose of Disbursement  Primary Category/ Type  Transaction ID : \$829.14520  Transaction ID : \$829.14520  Amount of Each Disbursement this Period  Caregory/ Type  Transaction ID : \$829.14520  Transaction ID : \$829.14520  Amount of Each Disbursement this Period  Transaction ID : \$829.14520		Mailing Address 3318 Hedgemoor Circle					
Spring Lake NC 28590 Purpose of Disbursement Primary contribution-NC House Candidate Name  Category/ Type  Disbursement For: Senate President Primary General President Primary Contribution-NC House Cardidate Name  City State Zip Code House Candidate Name  Category/ Type  Disbursement For: State Zip Code NC 28793  Purpose of Disbursement Primary General Primary Contribution-NC House Candidate Name  Category/ Type  Disbursement For: Senate President Other (specify) ▼  Date of Disbursement Disbursement Primary General Primary Contribution-NC House Candidate Name  Category/ Type  Disbursement For: Senate President Other (specify) ▼  Date of Disbursement this Period  Transaction ID : 3829.14519  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Date of Disbursement this Period  Transaction ID : 3829.14519  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Date of Disbursement this Period  Date of Disbursement  Date of Disbursement this Period  Date of Disbursement this Period  Date of Disbursement		City	State	Zip Code		Transaction II	) . SP20 14516
Primary contribution-NC House  Candidate Name  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Composed Disbursement this Period  Date of Disbursement  Full Name (Last, First, Middle Initial)  B. Chuck McGrady  Mailing Address PO BOX 723  City Hendersonville NC 28793  Purpose of Disbursement Primary contribution-NC House  Candidate Name  Category/ Type  Transaction ID : SB29.14519  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14519  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14519  Category/ Type  Date of Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Date of Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Date of Disbursement  Other (specify) ▼  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14520			NC	28390		Transaction it	J . 3B29.14310
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Detailed Summary Page 27 28a 28b 28c 28 28 28 30b 28 30b 28 30b 28 30b 28 30b	ITEMIZED DISBURSEMENTS			I ' — '			
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.  MAME OF COMMITTEE (In Full)  North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Paul Stam  Date of Disbursement  Primary contribution-Not House  Candidate Name  Category/ Type  Office Sought: House   Disbursement For:							
NAME OF COMMITTEE (in Pail) North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial) A. Paul Stam  Mailing Address 714 Hunter Street  City State Zip Code Apass NC 27592  Prippose of Disbursement Primary General Primary General Primary General Primary Contribution-NC House  City State Zip Code Apass State District  Full Name (Last, First, Middle Initial)  B. Edgar Starnes  Mailing Address 6715 Lakeview Terrace  City State Zip Code Hickory NC 28501  Prippose of Disbursement For:  City State Zip Code Hickory NC 28501  Primary General Prim	Δr	by information copied from such Reports and Staten	nente may	not be sold or us			
North Carolina Medical Society Federal Political Education and Action Committee  Full Name (Last, First, Middle Initial)  A. Paul Stam  Mailing Address 714 Hunter Street  City State Zip Code NC 27502  Purpose of Disbursement Primary contribution-NC House  Cardidate Name  City State: Disbursement For: State: Disbursement For: State: Disbursement For: Senate President Primary Contribution-NC House  City State: Disbursement For: State: Disbursement For: Senate President Disbursement For: Senate Primary General Primary Category/ Type  State: Disbursement Primary General Primary General Primary Category/ Type  State: Disbursement Primary General Primary General Primary Category/ Type  State: Disbursement Primary General							
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State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. Edgar Starnes  Mailing Address 6715 Lakeview Terrace  City State Zip Code Hickory NC 28601  Purpose of Disbursement Primary contribution-NC House  Candidate Name Category/ Type  Office Sought: House President Other (specify) ▼  Full Name (Last, First, Middle Initial)  C. Joe Tolson  Mailing Address 105 EDGEWOOD DR  City State Zip Code Primary General President NC 27864  Purpose of Disbursement For:  Full Name (Last, First, Middle Initial)  C. Joe Tolson  Mailing Address 105 EDGEWOOD DR  City Pinetops NC 27864  Purpose of Disbursement Primary General Primary Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement  Transaction ID : SB29.14528  Amount of Each Disbursement Date of Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB29.14528		Office Sought: House Disburser	nent For:				
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Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Joe Tolson  Mailing Address 105 EDGEWOOD DR  City State Zip Code Pinetops NC 27864  Primary contribution-NC House  Candidate Name  Candidate Name  Disbursement For: Senate Primary General Other (specify)   Transaction ID: SB29.14528  Amount of Each Disbursement this Period  Category/ Type  1000.00  State: District:  Subtrotal of Disbursements This Page (optional)		0.00			Туре		1000.00
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Pinetops Purpose of Disbursement Primary contribution-NC House  Candidate Name  Category/ Type  Office Sought:  House Senate Primary President President State:  Disbursement For: Senate Primary Other (specify)  State:  Substrict:  Sub		City	State	Zip Code		Transaction ID	. CD20 44520
Primary contribution-NC House  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)			NC	27864		Transaction ID	: 5829.14528
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursement this Period  Amount of Each Disbursement this Period  1000.00  1000.00  3000.00							
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 23 OF 23			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b		
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Any information copied from such Reports and Stat or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
North Carolina Medical Society F	ederal Political Educa	ation and A	ction Committee		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. John Torbett	Jonn Torbett				
Mailing Address 210 BLUE RIDGE DRIVE			03 23 2012		
City	State Zip Code		Transaction ID : SB29.14526		
Stanley Purpose of Disbursement	NC 28164		1141104041011 12 1 022011 1020		
Primary contribution-NC House			Amount of Each Disbursement this Period		
Candidate Name		Category/	2000.00		
Office Sought: House Disburs	ement For:	Type	2000.00		
Senate Disburs	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
B. Roger West	Roger West				
Mailing Address 211 Gayle-Lea Road	03 23 2012				
City Marble	State Zip Code NC 28905		Transaction ID : SB29.14527		
Purpose of Disbursement Primary contribution-NC House			Amount of Each Disbursement this Period		
Candidate Name		Category/	4000.00		
		Type	1000.00		
Office Sought: House Disburs Senate	ement For:    Primary   General				
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
C.					
Mailing Address	M M / D D / Y Y Y Y				
City	State Zip Code				
Purpose of Disbursement					
F					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
	ement For:		7 - 7		
Senate	Primary General				
State: District:	Other (specify) ▼				
S.M.O. BIOLITOL					
SUBTOTAL of Disbursements This Page (optional)			3000.00		
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