

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

Palombo for Congress Committee

ADDRESS (number and street) ▼

P. O. Box 12832

Check if different than previously reported. (ACC)

New Bern

NC

28561

2. **FEC IDENTIFICATION NUMBER** ▼

C C00501635

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NC

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Lisa Marie Marley

Signature of Treasurer Lisa Marie Marley

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Palombo for Congress 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))....	20294.03	40752.92
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20294.03	40752.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15066.55	21307.31
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15066.55	21307.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	19445.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	14.46	

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

Palombo for Congress 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).....	9574.03	27011.53
(ii) Unitemized.....	5720	7822
(iii) TOTAL of contributions from individuals ▶	15294.03	34833.53
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) The Candidate.....	5000	5919.39
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	20294.03	40752.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	.25	.25
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	20294.28	40753.17

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15066.55	21307.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	15066.55	21307.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	14218.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20294.28
25. SUBTOTAL (add Line 23 and Line 24).....	34512.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15066.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19445.86

**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 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Sabrina Bengel

Mailing Address 329 Middle St
A

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
City of New Bern Alderman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2011

Transaction ID : SA11Ai-CN142

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Lee Wilson Bettis Jr

Mailing Address 1608 Spencer Ave

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
City Of New Bern Mayor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2011

Transaction ID : SA11Ai-CN135

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Norman Frederick Boothe

Mailing Address 311 Jamie Cir

City State Zip Code
Emerald Isle NC 28594

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

Name of Employer Occupation
Retired - USCG & USPS Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2011

Transaction ID : SA11Ai-CN66

Amount of Each Receipt this Period
500

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Sherry Ann Bradbury

Mailing Address 129 St Gallen Ct

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
retired retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : SA11Ai-CN121

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
David Evan Byrd

Mailing Address 104 Bur Ben Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
CCHC Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : SA11Ai-CN157

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Robert William Cavanaugh Jr

Mailing Address 187 Ocean Dr

City State Zip Code
Newport NC 28570

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

Name of Employer Occupation
Self Employed Landscaping

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2011

Transaction ID : SA11Ai-CN64

Amount of Each Receipt this Period
500

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
James Thomas Early

Mailing Address 7056 Currituck Rd

City Kitty Hawk State NC Zip Code 27949

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 05 / 2011

Transaction ID : SA11Ai-CN85

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Robert John Hawk

Mailing Address 97 Duck Woods Dr

City Kitty Hawk State NC Zip Code 27949

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

Name of Employer Hawk Construction Occupation Carpenter

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SA11Ai-CN144

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Chris S Kelso

Mailing Address 102 Yacht Club Rd

City New Bern State NC Zip Code 28562

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

Name of Employer The Insurance Center Occupation Insurance Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 18 / 2011

Transaction ID : SA11Ai-CN104

Amount of Each Receipt this Period
500

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Harry MacDonald

Mailing Address 4508 Fairway Dr W

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Coastal Ear Nose & Throat physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : SA11Ai-CN90

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Lisa Marie Marley

Mailing Address 101 Elizabeth Ct

City State Zip Code
Kill Devil Hills NC 27948

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

Name of Employer Occupation
Apex Analytix Auditor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
216.03

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 05 / 2011

Transaction ID : SA11Ai-CN129

Amount of Each Receipt this Period
174.03

Website Expense reim - vendor aggregate

In-Kind Received

C. Full Name (Last, First, Middle Initial)
Sandra Sue Mattingly

Mailing Address 710 E Hightree Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 16 / 2011

Transaction ID : SA11Ai-CN98

Amount of Each Receipt this Period
50

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

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

474.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. William Graham Champion Mitchell		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2011
Mailing Address 3009 River Ln		Transaction ID : SA11Ai-CN152
City State Zip Code New Bern NC 28562	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) B. Richard Alexander Orr		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2011
Mailing Address 2418 Tram Rd		Transaction ID : SA11Ai-CN150
City State Zip Code New Bern NC 28562	Amount of Each Receipt this Period 250	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation D-ROC LLC Construction	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. Dana Edwards Outlaw		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2011
Mailing Address 4921 Morton Rd		Transaction ID : SA11Ai-CN99
City State Zip Code New Bern NC 28562	Amount of Each Receipt this Period 500	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Dana Outlaw Appraisals Appraiser	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
William H Prestage

Mailing Address 406 Coharie Dr

City State Zip Code
Clinton NC 28328

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

Name of Employer Occupation
Prestage Farms Inc. Hog Farmer/Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SA11Ai-CN126

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Pervis O Rodgers

Mailing Address 27 Gables Rd

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Dayspring Ministries Pastor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 01 / 2011

Transaction ID : SA11Ai-CN57

Amount of Each Receipt this Period
250

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

Mailing Address 609 Alexis Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SA11Ai-CN69

Amount of Each Receipt this Period
250

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Antoinette Salvati

Mailing Address 609 Alexis Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 19 / 2011

Transaction ID : SA11Ai-CN108

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Dorothy M Salvati

Mailing Address 609 Alexis Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SA11Ai-CN68

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Dorothy M Salvati

Mailing Address 609 Alexis Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 19 / 2011

Transaction ID : SA11Ai-CN109

Amount of Each Receipt this Period
200

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mary Foristel Tabb

Mailing Address 328 Mason Ln

City: Moyock State: NC Zip Code: 27958

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

Name of Employer: William E Wood & Associates Occupation: Real Estate Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: **11 / 05 / 2011**

Transaction ID : SA11Ai-CN77

Amount of Each Receipt this Period: **250**

B. Full Name (Last, First, Middle Initial)
Mary Foristel Tabb

Mailing Address 328 Mason Ln

City: Moyock State: NC Zip Code: 27958

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

Name of Employer: William E Wood & Associates Occupation: Real Estate Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **450**

Date of Receipt: **12 / 29 / 2011**

Transaction ID : SA11Ai-CN153

Amount of Each Receipt this Period: **100**

C. Full Name (Last, First, Middle Initial)
Brian Z Taylor

Mailing Address 5217 Trent Woods Dr

City: New Bern State: NC Zip Code: 28562

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

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **12 / 06 / 2011**

Transaction ID : SA11Ai-CN136

Amount of Each Receipt this Period: **250**

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Jeannie M Tyson

Mailing Address 4507 West Fairway Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Tyson & Hooks Real Estate Office Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : SA11Ai-CN123

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. John Steven Tyson

Mailing Address 700 Madam Moores Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Self Employed Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : SA11Ai-CN138

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Fay Kiser Yaniero

Mailing Address 1002 Pine Valley Rd

City State Zip Code
Jacksonville NC 28546

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

Name of Employer Occupation
Marine Corps Community Services Assistant Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2011

Transaction ID : SA11Ai-CN113

Amount of Each Receipt this Period
250

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

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

750.00

9574.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Frank Palombo

Mailing Address 1502 Tryon Rd

City State Zip Code
New Bern NC 28560

FEC ID number of contributing federal political committee. **C** H2NC03079

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5919.39

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : SA11D-CN151

Amount of Each Receipt this Period
5000

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).....

5000.00

5000.00

**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 15 OF 28			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 1000.00
City Minneapolis	State MN Zip Code 55427	
Purpose of Disbursement Campaign software	Category/Type 001	Transaction ID : SB17-EX29
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Campaign software
State: District:		

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 1330.00
City Minneapolis	State MN Zip Code 55427	
Purpose of Disbursement Campaign software	Category/Type 001	Transaction ID : SB17-EX41
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Campaign software
State: District:		

Full Name (Last, First, Middle Initial) c. Monte Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011
Mailing Address P. O. Box 12391		Amount of Each Disbursement this Period 185.35
City New Bern	State NC Zip Code 28561	
Purpose of Disbursement printing	Category/Type 006	Transaction ID : SB17-EX52
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	printing
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2515.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 28	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 7.33
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX37
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.50
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX54
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) C. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.83
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX38
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12.66
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 17 OF 28			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.87
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX39
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX49
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.20
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX50
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	19.27
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 18 OF 28			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.14
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	transaction processing	

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.14
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	transaction processing	

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 6.00
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Processing Fees 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	Processing Fees	

SUBTOTAL of Disbursements This Page (optional).....	8.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 28			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 7.33
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX61
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 5.95
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing fee	Transaction ID : SB17-EX62
Candidate Name	Category/Type 001	transaction processing fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2011
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement transaction processing	Transaction ID : SB17-EX66
Candidate Name	Category/Type 001	transaction processing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16.48
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 20 OF 28			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 800.00
City Burlington	State NC	
Purpose of Disbursement Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Oct 1-30		Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Oct 1-30
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 900.00
City Burlington	State NC	
Purpose of Disbursement Campaign management salary		Campaign management salary
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 900.00
City Burlington	State NC	
Purpose of Disbursement Campaign management salary		Campaign management salary
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	2600.00
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 21 OF 28	
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 400.00	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX34	
Purpose of Disbursement Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Nov 1-30		Category/ Type 001	Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Nov 1-30	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 900.00	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX40	
Purpose of Disbursement Campaign management salary		Category/ Type 001	Campaign management salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 900.00	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX45	
Purpose of Disbursement Campaign management salary		Category/ Type 001	Campaign management salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2200.00
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 22 OF 28	
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 400.00
City Burlington	State NC	
Zip Code 27215	Purpose of Disbursement Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Dec 1-30	Transaction ID : SB17-EX48
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Dec 1-30
State: District:		

Full Name (Last, First, Middle Initial) B. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 712.80
City Burlington	State NC	
Zip Code 27215	Purpose of Disbursement mileage reimbursement	Transaction ID : SB17-EX68
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	mileage reimbursement
State: District:		

Full Name (Last, First, Middle Initial) c. Brian Mullis		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 3209 English Ct		Amount of Each Disbursement this Period 900.00
City Burlington	State NC	
Zip Code 27215	Purpose of Disbursement Campaign management salary	Transaction ID : SB17-EX65
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Campaign management salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2012.80
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 23 OF 28	
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 279.72	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX69	
Purpose of Disbursement mileage reimbursement		Category/ Type 001	mileage reimbursement	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 900.00	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX70	
Purpose of Disbursement Campaign management salary		Category/ Type 001	Campaign management salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Brian Mullis			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011	
Mailing Address 3209 English Ct			Amount of Each Disbursement this Period 400.00	
City Burlington	State NC	Zip Code 27215	Transaction ID : SB17-EX71	
Purpose of Disbursement Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Jan 1-30		Category/ Type 001	Rent reim-Chris Yu 3343 Brunswick Ave New Bern NC Jan 1-30	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1579.72
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 24 OF 28	
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011	
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 52.80	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX27	
Purpose of Disbursement postage reimbursement		Category/ Type 001	postage reimbursement	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2011	
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 1000.00	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX31	
Purpose of Disbursement Campaign Management salary		Category/ Type 001	Campaign Management salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011	
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 1000.00	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX46	
Purpose of Disbursement Campaign Management salary		Category/ Type 001	Campaign Management salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2052.80
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 25 OF 28			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011		
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 12.81		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX47		
Purpose of Disbursement Event flowers reimbursement. vendor aggregate less than \$200		Category/Type 007	Event flowers reimbursement. vendor aggregate less than \$200		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012				
State: District:					

Full Name (Last, First, Middle Initial) B. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011		
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 1000.00		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX72		
Purpose of Disbursement Campaign Management salary		Category/Type 001	Campaign Management salary		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012				
State: District:					

Full Name (Last, First, Middle Initial) c. Metro Productions			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011		
Mailing Address 6005 Chapel Hill Road			Amount of Each Disbursement this Period 369.36		
City Raleigh	State NC	Zip Code 27607	Transaction ID : SB17-EX26		
Purpose of Disbursement printing		Category/Type 001	printing		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1382.17
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 26 OF 28		
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Lisa Marie Marley		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 101 Elizabeth Ct		Amount of Each Disbursement this Period 174.03
City Kill Devil Hills	State NC	
Zip Code 27948	Purpose of Disbursement IN-KIND RECEIVED	Transaction ID : SB17-CN129
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	174.03
TOTAL This Period (last page this line number only).....	14573.56

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Trail Blazer Campaign Services Inc.

Mailing Address 620 Mendelssohn Avenue N
Suite 186

City State Zip Code
Minneapolis MN 55427

Nature of Debt (Purpose):
Invoice: Campaign software

Outstanding Balance Beginning This Period **2330.00** Transaction ID : SD10-INV6

Amount Incurred This Period **.00** Payment This Period **2330.00** Outstanding Balance at Close of This Period **.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Vanco Services

Mailing Address 12600 Whitewater Drive
Suite 200

City State Zip Code
Minnetonka MN 55343

Nature of Debt (Purpose):
Invoice: merchant services

Outstanding Balance Beginning This Period **50.00** Transaction ID : SD10-INV5

Amount Incurred This Period **.00** Payment This Period **50.00** Outstanding Balance at Close of This Period **.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Vanco Services

Mailing Address 12600 Whitewater Drive
Suite 200

City State Zip Code
Minnetonka MN 55343

Nature of Debt (Purpose):
Invoice: transaction processing

Outstanding Balance Beginning This Period **.00** Transaction ID : SD10-INV63

Amount Incurred This Period **3.20** Payment This Period **.00** Outstanding Balance at Close of This Period **3.20**

1) SUBTOTALS This Period This Page (optional)	3.20
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vanco Services	Nature of Debt (Purpose): Invoice: transaction processing
Mailing Address 12600 Whitewater Drive Suite 200	
City State Zip Code Minnetonka MN 55343	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV70
Amount Incurred This Period <input style="width:100%;" type="text" value="11.26"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="11.26"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="11.26"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text" value="14.46"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="14.46"/>