Image# 12940767080 PAGE 1 / 16

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

101	Other Than All Addit	orized committe			Office Use Only
NAME OF COMMITTEE (in full)	PE OR PRINT ▼	Example: If typin over the lines.	ig, type	12FE4M5	
North Carolina Medical S	ociety Federal Polit	ical Education	and Actio	n Commit	tee
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 NUME	BER ▼ CITY	^	S	STATE 🛦	ZIP CODE ▲
C C00003152	3. IS		IEW N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 2 Report Due On:	20 (M2)	Лау 20 (М5)	Aug 2	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 2	20 (M3)	lun 20 (M6)	Sep 2	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 2	0 (M4)	lul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q2)	PRE-Election Report for the:	Convention (12C)	Special (1	12S)
October 15 Quarterly Report (Q3)		M M /	D D /	Y Y Y	in the
January 31 Year-End Report (YE)	Election				State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	X General (300	i)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Report for the:	M = M /		Y = Y = Y	in the
	Election	on 11	06	2012	State of NC
5. Covering Period 10	01 / 2012	through	M M M	26	2012
I certify that I have examined this F	Report and to the best of r	ny knowledge and b	elief it is true	e, correct and	complete.
Type or Print Name of Treasurer	Asst Treasurer Stephen W. K	eene			
Signature of Treasurer Asst Treasurer	surer Stephen W. Keene	[Electronically	Filed] Da	ate 11	/ D D / Y Y Y Y Y Y 2012
NOTE: Submission of false, erroneous	s. or incomplete information	may subject the pers	son sianina thi	s Report to th	e penalties of 2 U.S.C. 8437g
Office		y saajoot iilo pole		2 / 10 / 10 / 11	FEC FORM 3X
Use Only					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

26 2012 Report Covering the Period: 10 2012 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 19068.45 Beginning of Reporting Period..... 14125.12 48928.42 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 33193.57 82444.57 6(a) and 6(c) for Column B)..... 24000.00 73251.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 9193.57 9193.57 (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: 11 / 26 / 2012			
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
	Contributions (other than loans) From: (a) Individuals/Persons Other					
	Than Political Committees (i) Itemized (use Schedule A)	5220.00	20760.00			
	(ii) Unitemized(iii) TOTAL (add	, 8905.00	24157.00			
	Lines 11(a)(i) and (ii)	14125.00	44917.00			
	(b) Political Party Committees	0.00	0.00			
	(such as PACs)(d) Total Contributions (add Lines	0.00	4000.00			
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	14125.00	48917.00			
	Party Committees	0.00	0.00			
13.	All Loans Received	0.00	0.00			
15.	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	0.00	2.00			
	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00			
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.12	9.42			
	(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			
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	14125.12	48928.42			
	Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	14125.12	48928.42			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: (a) Allocated Federal/Non-Federal	rotal fills i criot	Calcilual Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
Ī				
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	1.00		
Expenditures	0.00	1.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	1.00		
Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	0.00	0.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use concount 1)	7 7			
Loan Repayments Made	0.00	0.00		
i i				
Loans Made	0.00	0.00		
(a) Individuals/Persons Other		0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(b) Political Party Committees	0.00			
(such as PACs)	0.00	0.00		
_				
(d) Total Contribution Refunds	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Dishurasments	24000.00	73250.00		
Other Disbursements	24000.00	73230.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	3.00			
Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	24000.00	73251.00		
	7			
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	24000.00	72251.00		
from Line 31)	24000.00	73251.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	14125.00	48917.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14125.00	48917.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	1.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2.00		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-1.00		

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

FOR LIN	E NUMBER	: PAGE	E 6 OF	16			
(check only one)							
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	e 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 A	ction Committee
Full Name (Last, First, Middle Initial) Dr. George Anthony Alsina Mailing Address, 18 Rehama Drive		Date of Receipt
Mailing Address 18 Bahama Drive		11 09 2012
City Wrightsville Beach	State Zip Code NC 28480	Transaction ID : SA11AI.14884
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	90.00
Name of Employer	Occupation	Voluntary member contribution
Port City Neurosurgery & Spine Receipt For:	Physician	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1090.00	
Full Name (Last, First, Middle Initial) 3. Dr. Laura Devereux Brown		Date of Receipt
Mailing Address 3010 Anderson Drive		10 01 Y Y Y Y Y Y
City Raleigh	State Zip Code NC 27609-7796	Transaction ID : SA11AI.14754
FEC ID number of contributing	2.000 1.00	Amount of Each Receipt this Period
federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Raleigh Ear, Nose & Throat Head and Ne	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Sandra Brown		Date of Receipt
Mailing Address 201 LePhillip Court, NE		10 08 2012
City Concord	State Zip Code NC 28025	Transaction ID : SA11AI.14756 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	Voluntary member contribution
Cabarrus Eye Center	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)	•	440.00
TOTAL This Period (last page this line number	only)	

I COLLETTE HOUSELL					PAGE	=	7	OF	16	
ı	(check only one)									
ı	×	11a		11b		11c		12	2	
ı		13		14		15		16	6	17

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Craig Burkhart Mailing Address 410 Market Street Ste 400 City Chapel Hill FEC ID number of contributing federal political committee. Name of Employer UNC Dermatology at Southern Vi Receipt For: Primary General Other (specify)	State Zip Code NC 27516 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt 10 30 2012 Transaction ID : SA11AI.14825 Amount of Each Receipt this Period 250.00 Voluntary member contribution
Full Name (Last, First, Middle Initial) Margaret K Burkhead Mailing Address 4414 Lake Boone Trail Suite 502 City Raleigh FEC ID number of contributing federal political committee. Name of Employer Raleigh Family Practice Receipt For: Primary General Other (specify)	State Zip Code NC 27607 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 31 2012 Transaction ID : SA11AI.14826 Amount of Each Receipt this Period 250.00 Voluntary member contribution
Full Name (Last, First, Middle Initial) C. Marston Crawford Mailing Address 703 Newman Road City New Bern FEC ID number of contributing federal political committee. Name of Employer Coastal Children's Clinic Receipt For: Primary General Other (specify)	State Zip Code NC 28562 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 17 2012 Transaction ID: SA11AI.14834 Amount of Each Receipt this Period 250.00 Voluntary member contribution
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	750.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER:					PAGE		8	OF	16
(check only one)									
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	13		14		15		16	,	17

	nd Statements may not be sold or used by any per- g the name and address of any political committee t	
NAME OF COMMITTEE (In Full) North Carolina Medical Socie	ety Federal Political Education and A	Action Committee
/		
Full Name (Last, First, Middle Initial) 1. Dr. Walter Douglas Harrison		Date of Receipt
Mailing Address PO Box 7200		M = M / D = D / Y = Y = Y
City	State Zip Code	10 29 2012 Transaction ID : SA11AI.14842
Rocky Mount	NC 27804-0200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Boice-Willis Clinic, PA	Occupation Physician	Voluntary member contribution
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen W. Keene		Date of Receipt
Mailing Address 100 Kettlebridge Drive		M M / D D / Y Y Y Y Y
City	State Zip Code	10 04 2012 Transaction ID : SA11AI.14770
Cary	NC 27511-6346	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer	Occupation	Voluntary member contribution
North Carolina Medical Society Receipt For:	Deputy Executive Vice President	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) C. David J. Koenig	·	Date of Receipt
Mailing Address PO Box 139		11 19 2012
City Supply	State Zip Code NC 28462	Transaction ID : SA11AI.14907 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer	Occupation	Voluntary member contribution
Brunswick Community Hospital	Physician	4
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	340.00	
SUBTOTAL of Receipts This Page (optiona	1)	680.00
TOTAL This Desired float one with "	har anha)	
IUIAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:					PAGE		9	OF	16
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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

North Carolina Medical Society	y Federal Political Education and A	ction Committee				
Full Name (Last, First, Middle Initial) A. William A McClelland		Date of Receipt				
Mailing Address 1107 Reynolds Street		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Monroe	State Zip Code NC 28112	Transaction ID : SA11AI.14776 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer Cornerstone Ear, Nose & Throat Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00	Voluntary member contribution				
Full Name (Last, First, Middle Initial) 3. Dr. Kai Miao Mailing Address 808 Llewellyn Drive		Date of Receipt 11 08 2012				
City Trent Woods	State Zip Code NC 28562	Transaction ID : SA11AI.14891 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer Carolina East Medical Center	Occupation Physician	Voluntary member contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) C. Dr. David Ferguson Moore Jr.		Date of Receipt				
Mailing Address 624 Quaker Lane Ste 208-C City	State Zip Code	10 02 2012 Transaction ID : SA11AI.14781				
High Point FEC ID number of contributing federal political committee.	NC 27262-3832	Amount of Each Receipt this Period 250.00				
Name of Employer High Point Ear, Nose & Throat Associat Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	Voluntary member contribution				
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	250.00	1000.00				
	er only)					

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

FOR LINE	NUMBER:	PAGE	10 OF	16				
(check only one)								
X 11a	11b	11c	12					
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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

/		1				
Full Name (Last, First, Middle Initial) A. Lenin J Peters		Date of Receipt				
Mailing Address 507 N Lindsay Stree		11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code NC 27262	Transaction ID : SA11AI.14896				
High Point	NC 27262	_ Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer	Occupation	Voluntary member contribution				
Bethany Medical Center	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
B. John A. A. Seldomridge	Full Name (Last, First, Middle Initial) John A. A. Seldomridge					
Mailing Address 31 Office Park Drive	10 08 2012					
City	State Zip Code	Transaction ID : SA11AI.14790				
Jacksonville	NC 28546	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer	Occupation	Voluntary member contribution				
Eastern Carolina Orthopaedic C	Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial) C. Dr. Patrick Joseph Simpso		Date of Receipt				
Mailing Address 205 Page Road		11 19 2012				
City Pinehurst	State Zip Code NC 28374-8749	Transaction ID : SA11AI.14898 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	Voluntary member contribution				
Pinehurst Medical Clinic, Inc.	Physician					
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General Other (specify) ▼	250.00					
	e number only)	1250.00				

						PAGE		11	OF	16
l	(check only one)									
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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	v Federal Political Education and A	oction Committee
/ Notur Carollia Medical Socie	ty Federal Political Education and A	
Full Name (Last, First, Middle Initial) A. Dr. Kevin Martin Spangler		Date of Receipt
Mailing Address 3155 Maplewood Avenue		10 05 2012
City	State Zip Code	Transaction ID : SA11AI.14793
Winston Salem	NC 27103-3900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Forsyth Radiological Associates, PA	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Phillip Talbert		Date of Receipt
Mailing Address 104 Blue Spruce Drive	10 29 _2012 _	
City	State Zip Code	Transaction ID : SA11AI.14867
Shelby	NC 28152	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	250.00
Name of Employer	Voluntary member contribution	
Dermatology Center of Shelby,	Occupation Physician Assistant	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Dr. Grace Emerson Terrell		Date of Receipt
Mailing Address 624 Quaker Lane Ste 200E		10 31 2012
City	State Zip Code	Transaction ID : SA11AI.14869
High Point	NC 27262-3800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	Voluntary member contribution
Cornerstone Healthcare	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).	>	750.00
. 3 (<u>_</u>	
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 12 OF 16								
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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	hy Fodorol Dollifer I Februari 1 A	lation Committee
/ North Carolina Medical Socie	ty Federal Political Education and A	ACHON COMMITTEE
Full Name (Last, First, Middle Initial) Dr. John Joseph Walker		Date of Receipt
Mailing Address 1701 Westchester Avenue		M = M / D = D / Y = Y = Y
Ste 850 City	State Zip Code	10 29 2012 Transaction ID : SA11AI.14873
High Point	NC 27262-3832	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary membership contributions
Cornerstone Healthcare	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Samuel H. Zimmern		Date of Receipt
Mailing Address 1001 Blythe Boulevard		M M / D D / Y Y Y Y Y
Ste 300 City	State Zip Code	10 24 2012 Transaction ID : SA11AI.14881
Charlotte	NC 28203-5863	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	Voluntary member contribution
The Sanger Clinic, PA	Physician	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Employer	Occupation	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	_
SUBTOTAL of Receipts This Page (optional)		350.00
		7000 00
TOTAL This Period (last page this line numb	er only)	5220.00

S ľ

S	CHEDULE B (FEC Form 3X)			FOR	LINE I	NUMBER	:		PAGE	13 (OF 16
IT	EMIZED DISBURSEMENTS	Use separat for each cat	e schedule(s)	(s) (check only one)							
		Detailed Sur			21b	22	23		24	25	26
_					27	28a	28b		28c 🔀	•	30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the name										
	NAME OF COMMITTEE (In Full)										
	North Carolina Medical Society Fed	deral Politi	cal Educa	ition an	nd Ad	ction C	ommit	tee			
_	Full Name (Last, First, Middle Initial)										
Α.	Janet Cowell	Date o	f Disburs	ement		/	V				
	Mailing Address 230 Grand Avenue					10		02		012	4
	City 5		ip Code			Trans	saction II) · CD	20 1/20	0	
	Raleigh	NC 2	7606			ITalis	action it	, JD	23.1400	3	
	Purpose of Disbursement 2012 General Election NC Treasurer			F		Amoun	t of Each	Disb	ursemen	t this I	Period
	Candidate Name			Categor	y/					1000	0.00
	Office Sought: House Disbursen	nent For:		Туре			7		,		
	Senate	Primary	General								
	President	Other (specify)	\								
	State: District:										
_	Full Name (Last, First, Middle Initial)										
В.	Wayne Goodwin					Date o	f Disburs	ement	t		
	Mailing Address PO Box 27841					10		18		2012	Y
	City State Zip Code Raleigh NC 27611						saction II) : SB	29.1481	4	
	Purpose of Disbursement		.7011								
	2012 General Election -NC Insurance Commissione	er		Amount of Each Disbursement this Period							
	Candidate Name			Categor	y/		1000	00			
				Type			- 7	-	7	1000	5.00
	Office Sought: House Disbursen Senate	nent For: Primary	General								
		Other (specify)									
	State: District:	o ii.o. (opoo)	•								
_	Full Name (Last, First, Middle Initial)										
C.	Susi Hamilton					Date o	f Disburs	ement	t		
						M M		D		Y	Υ
	Mailing Address P.O. BOX 637					10		02	2	012	
	City S	State Z	ip Code								
			8402			Trans	saction II	D : SB	29.1480	7	
	Purpose of Disbursement 2012 General Election NC House										
				Amoun	t of Each	Disb	ursemen	t this F	Period		
	Candidate Name	Categor Type	y/					4000	0.00		
	Office Sought: House Disbursen	nent For:		rype	-		7		7		
	Senate	Primary	General								
	President	Other (specify)	\								
	State: District:										
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$ \rangle$	North Carolina Medical Society Fed	deral Po	litical Educa	ation	and	d Ac	tion C	Com	nmitt	ee				
\angle	Full Name (Last, First, Middle Initial)													
Α.	Mark Hollo						Date of	of Dis	sburse	ment				
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	Mailing Address 432 Westwood Lane						10		1	6	_20			
	City	`toto	Zin Cada			\dashv								
	City S Taylorsville	State NC	Zip Code 28681				Tran	sacti	ion ID	: SB29	.14812			
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	Mailing Address 2905 Ernest Williams Road						10		1	8	20)12		
	City Code													
	City S Autryville	State NC	Zip Code 28818				Tran	sact	ion ID	: SB29	.14818			
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C.	Tim Moffitt						Date of	of Dis	sburse	ment				
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	Mailing Address 3182 Sweeten Creek Road						10		1	6	_ 20	12		
	City	State	Zip Code			_								
	•	NC	28803				Tran	sact	ion ID	: SB29	.14813			
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Α.	Tim Moore						Date o	of Dis	sburse	ment			
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	Mailing Address 305 East King St.						10		10	6	_20	12	
	City	Stato	Zin Codo			_							
	City S Kings Mountain	State NC	Zip Code 28086				Trans	sacti	ion ID	: SB29	.14811		
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	Full Name (Last, First, Middle Initial)												
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	Mailing Address PO Box 945						10		1	8	20)12	
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	Mt. Olive	NC	Zip Code 28365				Tran	sacti	ion ID	: SB29	.14817		
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_	Full Name (Last, First, Middle Initial)						D - 1	۲ ۲۰	- I= . · · ·				
U.	Bill Rabon						Date o						
	Mailing Address 404 Brunswick Street					\dashv	10	/	18			12	Υ
	,	State	Zip Code				Trans	sacti	ion ID	: SB29	.14819		
	Southport Purpose of Disbursement	NC	28461										
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NAME OF COMMITTEE (In Full)									
North Carolina Medical Society Fed	deral Political Educa	ation and A	ction Committee)					
Full Name (Last, First, Middle Initial)			5						
A. Paul Stam			Date of Disburseme						
Mailing Address 714 Hunter Street			10 16	2012					
•	State Zip Code		Transaction ID : S	R20 1/810					
, ipost	NC 27502		Transaction ib . 3	B29.14010					
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	Primary General								
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Full Name (Last, First, Middle Initial)			5						
B. Stan White			Date of Disburseme						
Mailing Address Drawer 1447			10 18 2012						
,	State Zip Code NC 27959								
Purpose of Disbursement 2012 General Election NC Senate		· · · · ·	Amount of Each Dis	bursement this Period					
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C. Michael Wray			Date of Disburseme	nt					
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Mailing Address PO Box 904			10 01	2012					
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	NC 27832		Transaction ID : S	6629.14806					
Purpose of Disbursement 2012 General Election-NC House									
Candidate Name		Amount of Each Dis	bursement this Period						
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