

# 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

JEFF HUNT FOR CONGRESS

ADDRESS (number and street)

PO BOX 1001

Check if different than previously reported. (ACC)

BREVARD

NC

28712

2. **FEC IDENTIFICATION NUMBER**

C C00500728

CITY

STATE

ZIP CODE

STATE DISTRICT

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

NC

11

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on 05 / 08 / 2012 in the State of NC

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

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

Election on 05 / 08 / 2012 in the State of NC

5. Covering Period

04 / 01 / 2012

through

04 / 18 / 2012

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 Zacheus Harvey Daw III

Signature of Treasurer Zacheus Harvey Daw III

[Electronically Filed]

Date

04 / 25 / 2012

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 |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**JEFF HUNT FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

|                                                                                                                 | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                         |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                             | 1250.00                 | 138910.49                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                       | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 1250.00                 | 138910.49                          |
| 7. Net Operating Expenditures                                                                                   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                        | 20494.88                | 107726.26                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                              | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 20494.88                | 107726.26                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                             | 42704.23                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 11600.00                |                                    |

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**JEFF HUNT FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

| <b>I. RECEIPTS</b>                                                                                         | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>                                                          |                                       |                                            |
| (a) Individuals/Persons Other Than Political Committees                                                    |                                       |                                            |
| (i) Itemized (use Schedule A).....                                                                         | 900.00                                | 124345.49                                  |
| (ii) Unitemized.....                                                                                       | 350.00                                | 14170.00                                   |
| (iii) TOTAL of contributions from individuals ▶                                                            | 1250.00                               | 138515.49                                  |
| (b) Political Party Committees.....                                                                        | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....                                                         | 0.00                                  | 395.00                                     |
| (d) The Candidate.....                                                                                     | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 1250.00                               | 138910.49                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>                                                | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>                                                                                          |                                       |                                            |
| (a) Made or Guaranteed by the Candidate.....                                                               | 0.00                                  | 11600.00                                   |
| (b) All Other Loans.....                                                                                   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....                                                             | 0.00                                  | 11600.00                                   |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>                                                | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 1250.00                               | 150510.49                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 20494.88                      | 107726.26                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 80.00                              |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 20494.88                      | 107806.26                          |

**III. CASH SUMMARY**

|                                                                                       |          |
|---------------------------------------------------------------------------------------|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 61949.11 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 1250.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 63199.11 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 20494.88 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 42704.23 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N  
Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule:  
Transaction ID:

**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 15 |
|                                                                         | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**JEFF HUNT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard E. Faulkner**

Mailing Address 751 Lake Club Dr.

City: Nebo State: NC Zip Code: 28761

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: 300.00

Date of Receipt: 04 / 05 / 2012

**Transaction ID : SA11AI.5279**

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
**J Loyd Kirk**

Mailing Address 16 Boddington Ct

City: Asheville State: NC Zip Code: 28803

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: 300.00

Date of Receipt: 04 / 17 / 2012

**Transaction ID : SA11AI.5286**

Amount of Each Receipt this Period: 300.00

**C.** Full Name (Last, First, Middle Initial)  
**J. G. Gordon Strayhorn**

Mailing Address 500 Illahee Rd

City: Brevard State: NC Zip Code: 28712

FEC ID number of contributing federal political committee: C

Name of Employer: Camp Illahee Occupation: Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 09 / 2012

**Transaction ID : SA11AI.5280**

Amount of Each Receipt this Period: 500.00

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

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

900.00

900.00

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

|                                                                         |                                                                                                                                                         |              |  |  |  |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                                                                                                    | PAGE 7 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. 1290 WHKY-AM</b>                                                                  |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 05 / 2012                          |
| Mailing Address PO Box 1059                                                                                                        |                                                                                                                           | Amount of Each Disbursement this Period<br>864.00<br><b>Transaction ID : SB17.5243</b> |
| City<br>Hickory                                                                                                                    | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28603                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                                                                                    |                                                                                                                           |                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Advantage Printing</b>                                                            |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2012                           |
| Mailing Address 1848 Brevard Road                                                                                                  |                                                                                                                           | Amount of Each Disbursement this Period<br>2586.17<br><b>Transaction ID : SB17.5265</b> |
| City<br>Arden                                                                                                                      | State<br>NC                                                                                                               |                                                                                         |
| Zip Code<br>28704                                                                                                                  | Purpose of Disbursement<br>Direct Mail Services                                                                           | Category/<br>Type                                                                       |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                         |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                         |

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>c. April Byrd Consulting</b>                                                         |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 12 / 2012                          |
| Mailing Address 13517 Glencreek Lane                                                                                               |                                                                                                                           | Amount of Each Disbursement this Period<br>965.87<br><b>Transaction ID : SB17.5259</b> |
| City<br>Huntersville                                                                                                               | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28078                                                                                                                  | Purpose of Disbursement<br>Fundraising Consulting                                                                         | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4416.04 |
| <b>TOTAL</b> 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:<br>(check only one)                                                                                                                    | PAGE 8 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                                    |             |                   |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Blue Ridge Christian News</b>                                                     |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2012                          |
| Mailing Address 29 Crystal Street, Suite 101                                                                                       |             |                   | Amount of Each Disbursement this Period<br>330.00<br><b>Transaction ID : SB17.5235</b> |
| City<br>Spruce Pine                                                                                                                | State<br>NC | Zip Code<br>28777 |                                                                                        |
| Purpose of Disbursement<br>Advertising                                                                                             |             | Candidate Name    | Category/<br>Type                                                                      |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President          |             |                   |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | State: District:  |                                                                                        |

|                                                                                                                                    |             |                   |                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Charter Media</b>                                                                 |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 13 / 2012                           |
| Mailing Address 1305 10th Avenue Lane SE                                                                                           |             |                   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.5262</b> |
| City<br>Hickory                                                                                                                    | State<br>NC | Zip Code<br>28602 |                                                                                         |
| Purpose of Disbursement<br>Advertising                                                                                             |             | Candidate Name    | Category/<br>Type                                                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President          |             |                   |                                                                                         |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | State: District:  |                                                                                         |

|                                                                                                                                    |             |                   |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Clear Channel Radio</b>                                                           |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 05 / 2012                          |
| Mailing Address 13 Summerlin Road                                                                                                  |             |                   | Amount of Each Disbursement this Period<br>480.00<br><b>Transaction ID : SB17.5241</b> |
| City<br>Asheville                                                                                                                  | State<br>NC | Zip Code<br>28806 |                                                                                        |
| Purpose of Disbursement<br>Advertising                                                                                             |             | Candidate Name    | Category/<br>Type                                                                      |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President          |             |                   |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | State: District:  |                                                                                        |

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 2810.00 |
| <b>TOTAL</b> 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:<br>(check only one)                                                                                                                    | PAGE 9 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                           |                                                                                                                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Comporium</b>                                                            |                                                                                                                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2012 |
| Mailing Address PO Box 63022                                                                                              |                                                                                                                                    | Amount of Each Disbursement this Period<br>71.01              |
| City<br>Charlotte                                                                                                         | State<br>NC                                                                                                                        |                                                               |
| Zip Code<br>28263-3022                                                                                                    | Purpose of Disbursement<br>Telephone Services                                                                                      | Transaction ID : SB17.5272                                    |
| Candidate Name                                                                                                            | Category/Type                                                                                                                      |                                                               |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                          |                                                                                                                                    |                                                               |

|                                                                                                                           |                                                                                                                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Randall Dean Fink</b>                                                    |                                                                                                                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 11 / 2012 |
| Mailing Address 1107 Halesworth Dr                                                                                        |                                                                                                                                    | Amount of Each Disbursement this Period<br>825.00             |
| City<br>Charlotte                                                                                                         | State<br>NC                                                                                                                        |                                                               |
| Zip Code<br>28211                                                                                                         | Purpose of Disbursement<br>Accounting/Compliance Consulting                                                                        | Transaction ID : SB17.5255                                    |
| Candidate Name                                                                                                            | Category/Type                                                                                                                      |                                                               |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                          |                                                                                                                                    |                                                               |

|                                                                                                                           |                                                                                                                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Go Nuts Media LLC</b>                                                    |                                                                                                                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2012 |
| Mailing Address 62 West Main Street                                                                                       |                                                                                                                                    | Amount of Each Disbursement this Period<br>210.00             |
| City<br>Brevard                                                                                                           | State<br>NC                                                                                                                        |                                                               |
| Zip Code<br>28712                                                                                                         | Purpose of Disbursement<br>Advertising                                                                                             | Transaction ID : SB17.5233                                    |
| Candidate Name                                                                                                            | Category/Type                                                                                                                      |                                                               |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                          |                                                                                                                                    |                                                               |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1106.01 |
| <b>TOTAL</b> 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:<br>(check only one)                                                                                                                    | PAGE 10 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                  |                                                                                                                              |                                                                                         |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Matthew J. Mercer</b>                                       |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2012                           |
| Mailing Address 190 Ellisboro Road                                                                               |                                                                                                                              | Amount of Each Disbursement this Period<br>1375.00<br><b>Transaction ID : SB17.5232</b> |
| City Madison State NC Zip Code 27025                                                                             | Purpose of Disbursement<br>Field Representative                                                                              |                                                                                         |
| Candidate Name                                                                                                   |                                                                                                                              | Category/Type                                                                           |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                                                         |
| State: District:                                                                                                 |                                                                                                                              |                                                                                         |

|                                                                                                                  |                                                                                                                              |                                                                                         |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Matthew J. Mercer</b>                                       |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2012                           |
| Mailing Address 190 Ellisboro Road                                                                               |                                                                                                                              | Amount of Each Disbursement this Period<br>1375.00<br><b>Transaction ID : SB17.5264</b> |
| City Madison State NC Zip Code 27025                                                                             | Purpose of Disbursement<br>Field Representative                                                                              |                                                                                         |
| Candidate Name                                                                                                   |                                                                                                                              | Category/Type                                                                           |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                                                         |
| State: District:                                                                                                 |                                                                                                                              |                                                                                         |

|                                                                                                                  |                                                                                                                              |                                                                                        |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Richard Minter</b>                                              |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2012                          |
| Mailing Address 2420 South Queen St                                                                              |                                                                                                                              | Amount of Each Disbursement this Period<br>562.66<br><b>Transaction ID : SB17.5248</b> |
| City Arlington State VA Zip Code 22202                                                                           | Purpose of Disbursement<br>Reimbursement: Fuel, Mileage                                                                      |                                                                                        |
| Candidate Name                                                                                                   |                                                                                                                              | Category/Type                                                                          |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                                                        |
| State: District:                                                                                                 |                                                                                                                              |                                                                                        |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3312.66 |
| <b>TOTAL</b> 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:<br>(check only one)                                   | PAGE 11 OF 15                                               |                                                              |                                                             |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                                    |                                                                                                                           |                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Nomadic Communications</b>                                                        |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 12 / 2012                           |
| Mailing Address 144 Farm Springs Drive                                                                                             |                                                                                                                           | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.5260</b> |
| City<br>Mount Holly                                                                                                                | State<br>NC                                                                                                               |                                                                                         |
| Zip Code<br>28120                                                                                                                  | Purpose of Disbursement<br>Advertising Production                                                                         | Category/<br>Type                                                                       |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                         |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                         |

|                                                                                                                                    |                                                                                                                           |                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Piryx</b>                                                                         |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2012                        |
| Mailing Address 144 2nd Street<br>1st Floor                                                                                        |                                                                                                                           | Amount of Each Disbursement this Period<br>6.50<br><b>Transaction ID : SB17.5290</b> |
| City<br>San Francisco                                                                                                              | State<br>CA                                                                                                               |                                                                                      |
| Zip Code<br>94105                                                                                                                  | Purpose of Disbursement<br>Merchant Transaction Fees                                                                      | Category/<br>Type                                                                    |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                      |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                      |

|                                                                                                                                    |                                                                                                                           |                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2012                           |
| Mailing Address 211 West Main Street                                                                                               |                                                                                                                           | Amount of Each Disbursement this Period<br>3912.17<br><b>Transaction ID : SB17.5266</b> |
| City<br>Brevard                                                                                                                    | State<br>NC                                                                                                               |                                                                                         |
| Zip Code<br>28712                                                                                                                  | Purpose of Disbursement<br>Postage                                                                                        | Category/<br>Type                                                                       |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                         |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                         |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5418.67 |
| <b>TOTAL</b> 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:<br>(check only one)                                                                                                                    | PAGE 12 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                  |                                                                                                                              |                                                               |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>                                                        |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2012 |
| Mailing Address 211 West Main Street                                                                             |                                                                                                                              | Amount of Each Disbursement this Period<br>90.00              |
| City Brevard                                                                                                     | State NC                                                                                                                     |                                                               |
| Zip Code 28712                                                                                                   | Purpose of Disbursement Postage                                                                                              | Transaction ID : SB17.5267                                    |
| Candidate Name                                                                                                   | Category/Type                                                                                                                |                                                               |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                 |                                                                                                                              |                                                               |

|                                                                                                                  |                                                                                                                              |                                                               |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. WHKP</b>                                                        |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2012 |
| Mailing Address PO Box 2470                                                                                      |                                                                                                                              | Amount of Each Disbursement this Period<br>176.00             |
| City Henderrsonville                                                                                             | State NC                                                                                                                     |                                                               |
| Zip Code 28793                                                                                                   | Purpose of Disbursement Advertising                                                                                          | Transaction ID : SB17.5270                                    |
| Candidate Name                                                                                                   | Category/Type                                                                                                                |                                                               |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                 |                                                                                                                              |                                                               |

|                                                                                                                  |                                                                                                                              |                                                               |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. WHKP</b>                                                        |                                                                                                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2012 |
| Mailing Address PO Box 2470                                                                                      |                                                                                                                              | Amount of Each Disbursement this Period<br>264.00             |
| City Henderrsonville                                                                                             | State NC                                                                                                                     |                                                               |
| Zip Code 28793                                                                                                   | Purpose of Disbursement Advertising                                                                                          | Transaction ID : SB17.5271                                    |
| Candidate Name                                                                                                   | Category/Type                                                                                                                |                                                               |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                                               |
| State: District:                                                                                                 |                                                                                                                              |                                                               |

|                                                                 |        |
|-----------------------------------------------------------------|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 530.00 |
| <b>TOTAL</b> 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:<br>(check only one)                                                                                                                    | PAGE 13 OF 15 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. WKRK</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 17 / 2012                          |
| Mailing Address 427 Hill Street                                                                                                    |                                                                                                                           | Amount of Each Disbursement this Period<br>405.00<br><b>Transaction ID : SB17.5268</b> |
| City<br>Murphy                                                                                                                     | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28906                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. WKYK</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2012                          |
| Mailing Address PO Box 744                                                                                                         |                                                                                                                           | Amount of Each Disbursement this Period<br>340.00<br><b>Transaction ID : SB17.5251</b> |
| City<br>Burnsville                                                                                                                 | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28714                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. WMNC</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 11 / 2012                          |
| Mailing Address PO Box 969                                                                                                         |                                                                                                                           | Amount of Each Disbursement this Period<br>905.00<br><b>Transaction ID : SB17.5257</b> |
| City<br>Marganton                                                                                                                  | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28680                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1650.00 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 14 OF 15                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>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)  
**JEFF HUNT FOR CONGRESS**

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. WNCC</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 04 / 2012                          |
| Mailing Address PO Box 470                                                                                                         |                                                                                                                           | Amount of Each Disbursement this Period<br>416.00<br><b>Transaction ID : SB17.5237</b> |
| City<br>Franklin                                                                                                                   | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28734                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

|                                                                                                                                    |                                                                                                                           |                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. WTOE</b>                                                                          |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2012                          |
| Mailing Address PO Box 607                                                                                                         |                                                                                                                           | Amount of Each Disbursement this Period<br>710.50<br><b>Transaction ID : SB17.5253</b> |
| City<br>Burnsville                                                                                                                 | State<br>NC                                                                                                               |                                                                                        |
| Zip Code<br>28714                                                                                                                  | Purpose of Disbursement<br>Advertising                                                                                    | Category/<br>Type                                                                      |
| Candidate Name                                                                                                                     | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                                                                        |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                                                                                          |                                                                                        |

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

|                                                                 |          |
|-----------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1126.50  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 20369.88 |

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4726**  
**JEFF HUNT FOR CONGRESS**

|                                                                                        |                         |                                                                                                                                                 |
|----------------------------------------------------------------------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>JEFFREY PAUL HUNT</b> | <b>[PERSONAL FUNDS]</b> | Election: 2012<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>PO BOX 1001                                                         |                         |                                                                                                                                                 |

|         |       |          |
|---------|-------|----------|
| City    | State | ZIP Code |
| BREVARD | NC    | 28712    |

|                         |                            |                                             |
|-------------------------|----------------------------|---------------------------------------------|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 11600.00                | 0.00                       | 11600.00                                    |

**TERMS**

|                |            |               |                                                                     |
|----------------|------------|---------------|---------------------------------------------------------------------|
| Date Incurred  | Date Due   | Interest Rate | Secured:                                                            |
| 09 / 30 / 2011 | 12/31/2012 | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|                                            |                                                     |
|--------------------------------------------|-----------------------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation                                          |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation                                          |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation                                          |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation                                          |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |

|                                                              |                                       |
|--------------------------------------------------------------|---------------------------------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | <input type="text" value="11600.00"/> |
| <b>TOTALS</b> This Period (last page in this line only)..... | <input type="text" value="11600.00"/> |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**