

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DAVID ROUZER FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	326037.80	1267772.08
(b) Total Contribution Refunds (from Line 20(d))	6328.00	35620.20
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	319709.80	1232151.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	215130.65	1103779.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	114.20	23257.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	215016.45	1080521.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	192764.37	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

DAVID ROUZER FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	170482.51	732605.22
(ii) Unitemized	7455.00	42231.37
(iii) TOTAL of contributions from individuals	177937.51	774836.59
(b) Political Party Committees.....	1718.05	1718.05
(c) Other Political Committees (such as PACs).....	140850.00	451318.45
(d) The Candidate	5532.24	39898.99
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	326037.80	1267772.08
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	4379.71
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	40000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	114.20	23257.95
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	14050.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	326152.00	1349459.74

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	215130.65	1103779.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	40000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	6328.00	32420.20
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6328.00	35620.20
21. OTHER DISBURSEMENTS	1950.00	16230.31
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	223408.65	1195630.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	90021.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	326152.00
25. SUBTOTAL (add Line 23 and Line 24).....	416173.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	223408.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	192764.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD JULIUS ALLEN

Mailing Address 6593 CENTER ROAD

City: **BLADENBORO** State: **NC** Zip Code: **28320**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **09 / 27 / 2014**

Transaction ID : SA11AI.5516

Amount of Each Receipt this Period: **2000.00**

B. Full Name (Last, First, Middle Initial)
RONALD JULIUS ALLEN

Mailing Address 6593 CENTER ROAD

City: **BLADENBORO** State: **NC** Zip Code: **28320**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **09 / 27 / 2014**

Transaction ID : SA11AI.5594

Amount of Each Receipt this Period: **-400.00**

**[MEMO ITEM]
REATTRIBUTED TO ALLEN, KAYE**

C. Full Name (Last, First, Middle Initial)
JOHN DAVID ALLEN

Mailing Address 817 HOWES POINT PLACE

City: **WILMINGTON** State: **NC** Zip Code: **28405**

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

Name of Employer: **READY MIX CONCRETE** Occupation: **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: **08 / 28 / 2014**

Transaction ID : SA11AI.5267

Amount of Each Receipt this Period: **1600.00**

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KAYE ALLEN

Mailing Address 6593 CENTER ROAD

City State Zip Code
BLADENBORO NC 28320

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.5595

Amount of Each Receipt this Period
400.00

[MEMO ITEM]
REATTRIBUTED FROM ALLEN, RONALD

B. Full Name (Last, First, Middle Initial)
WILLIAM ANLYAN

Mailing Address 1702 POPE COURT

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
ANLYAN AND HIVELY ASSET MANAGEMENT MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5491

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ZACK BACON

Mailing Address 2200 WHITE OAK ROAD

City State Zip Code
RALEIGH NC 27608

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.5102

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM J. BAGGETT

Mailing Address **PO BOX 934**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480**

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

Name of Employer **BLOCKADE RUNNER BEACH RESORT** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PATRICK BALLANTINE

Mailing Address **6109 OLD BRANCH ROAD**

City **WILMINGTON** State **NC** Zip Code **28409**

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

Name of Employer **BALLANTINE COMPANY, INC** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5541

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
EDWARD S. BARCLAY JR.

Mailing Address **4 PIPERS NECK ROAD**

City **WILMINGTON** State **NC** Zip Code **28411**

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

Name of Employer **THE BARCLAY COMPANY** Occupation **REAL ESTATE BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.5263

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD S. BARCLAY JR.

Mailing Address 4 PIPERS NECK ROAD

City: WILMINGTON State: NC Zip Code: 28411

FEC ID number of contributing federal political committee: C

Name of Employer: THE BARCLAY COMPANY Occupation: REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3700.00

Date of Receipt: 09 / 17 / 2014

Transaction ID : SA11AI.5394

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
EDWARD S. BARCLAY JR.

Mailing Address 4 PIPERS NECK ROAD

City: WILMINGTON State: NC Zip Code: 28411

FEC ID number of contributing federal political committee: C

Name of Employer: THE BARCLAY COMPANY Occupation: REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4700.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11AI.5627

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT BARKER

Mailing Address 401 NORTH WOODROW STREET

City: FUQUAY VARINA State: NC Zip Code: 27526

FEC ID number of contributing federal political committee: C

Name of Employer: BOB BARKER COMPANY, INC. Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11AI.5539

Amount of Each Receipt this Period: 500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRENDA BARKER

Mailing Address 309 BRADLEY DRIVE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5259

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
ROBERT BARNHILL

Mailing Address 501 SHADY CIRCLE DRIVE

City State Zip Code
ROCKY MOUNT NC 27803

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

Name of Employer Occupation
BARNHILL CONTRACTING COMPANY CHAIRMAN OF THE BOARD AND CHIEF EXE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5271

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
COREY BARNHILL

Mailing Address 107 BARRUS AVENUE

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
SOUTHEASTERN GRAIN COMPANY, LLC MANAGING PARTNER/PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.5468

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CURTIS G. BARWICK

Mailing Address 103 COUNTRY CLUB CIRCLE

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
BARWICK AG SERVICES AG CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.5473

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KEITH M. BEATTY

Mailing Address 1120 ULLSWATER LANE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
INTRACOASTAL REALTY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5264

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STEVEN D BELL

Mailing Address 9 GRANVILLE OAKS CT

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
BELL PARTNERS INC. CHAIRMAN AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.5124

Amount of Each Receipt this Period
1250.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARY TIMOTHY BIZZELL

Mailing Address 125 DEERFIELD DRIVE

City State Zip Code
HAMPSTEAD NC 28443

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

Name of Employer Occupation
AMERICAN MATERIALS CO. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5268

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BILL BLAIR

Mailing Address 801 S LUMINA AVENUE

City State Zip Code
WRIGHTSVILLE BEACH NC 28480

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

Name of Employer Occupation
WRIGHTSVILLE BEACH MAYOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NEIL WESLEY BLAKE

Mailing Address 153 EDGEWATER LANE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
AMERICAN SKINS, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5347

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KENNETH RAY BLIZZARD

Mailing Address **PO BOX 6128**

City **KINSTON** State **NC** Zip Code **28501**

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

Name of Employer **CONTRACT FLOORING & DESIGN** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2850.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.5401

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DONALD R BLIZZARD

Mailing Address **PO BOX 416**

City **SNOW HILL** State **NC** Zip Code **28580**

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

Name of Employer **BLIZZARD FARMS** Occupation **AGRI BUSINESS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 09 / 2014

Transaction ID : SA11AI.5318

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PASCAL STRONG BOYD II

Mailing Address **1718 SIGNATURE PLACE**

City **WILMINGTON** State **NC** Zip Code **28405**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 02 / 2014

Transaction ID : SA11AI.5126

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM BRANSTROM

Mailing Address 314 EASTOVER ROAD

City State Zip Code
CHARLOTTE NC 28207

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

Name of Employer Occupation
BRANSTROM & ASSOCIATES REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5178

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
W. STEPHEN BRIGHT

Mailing Address 333 FOLLY ISLAND COURT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
TALBERT & BRIGHT, INC. ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.5218

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
W. STEPHEN BRIGHT

Mailing Address 333 FOLLY ISLAND COURT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
TALBERT & BRIGHT, INC. ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LINWOOD P. BRITTON JR.		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 2000 TRIMARAN PLACE		Transaction ID : SA11AI.5260	
City WILMINGTON	State NC	Zip Code 28405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. JAMES W. C. BROUGHTON		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 2560 WARWICK ROAD		Transaction ID : SA11AI.5250	
City WINSTON SALEM	State NC	Zip Code 27104	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer WOMBLE CARLYLE SANDRIDGE & RICE	Occupation SENIOR GOVERNMENT RELATIONS ADVISOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) C. KELLY ANN BROWNE		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 1723 E HAYMARKET WAY		Transaction ID : SA11AI.5197	
City HUDSON	State OH	Zip Code 44236	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HAROLD J BRUBAKER

Mailing Address 138 SCARBORO ST

City ASHEBORO State NC Zip Code 27203

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

Name of Employer BRUBAKER & ASSOCIATES, INC. - CONSULT Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CHRISTINE M BURGESSON

Mailing Address 2403 NORTH UTAH STREET

City ARLINGTON State VA Zip Code 22207

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

Name of Employer AIRLINES FOR AMERICA Occupation SVP, GLOBAL GOVERNMENT AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.5368

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PAUL BUTLER

Mailing Address PO BOX 985

City ELIZABETHTOWN State NC Zip Code 28337

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

Name of Employer NCS SOUTHEAST Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5083

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DALLAS M CAMPBELL JR

Mailing Address **PO BOX 637**

City **ELIZABETHTOWN** State **NC** Zip Code **28337**

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

Name of Employer **CAMPBELL OIL & GAS COMPANY** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11AI.5100

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THOMAS CAPPS

Mailing Address **4300 SULGRAVE ROADS**

City **RICHMOND** State **VA** Zip Code **23221**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : SA11AI.5103

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JEFFERY P. CARVER

Mailing Address **85 CHRISTENBURY LANE**

City **CLAYTON** State **NC** Zip Code **27527**

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

Name of Employer **JOHNSTON COUNTY / FIRST CITIZENS BANK** Occupation **CO COMMISSIONER / VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.5452

Amount of Each Receipt this Period
200.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN F. CHANEY

Mailing Address 305 VISTAMAR DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
JOHN F. CHANEY CONSTRUCTION CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.5198

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROGERS CLARK

Mailing Address PO BOX 469

City State Zip Code
CLINTON NC 28329

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

Name of Employer Occupation
SAMPSON BLADEN OIL COMPANY PETROLEUM MARKETER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.5395

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
VERNON RAY CLIFTON

Mailing Address 720 CAMPBELL ROAD

City State Zip Code
CLARKTON NC 28433

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

Name of Employer Occupation
SELF EMPLOYED LONG TERM CARE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11AI.5067

Amount of Each Receipt this Period
200.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERNEST BROCKMAN COGGINS

Mailing Address 908 NORTH LEBANON STREET

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4405.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 23 / 2014

Transaction ID : SA11AI.5200

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ERNEST BROCKMAN COGGINS

Mailing Address 908 NORTH LEBANON STREET

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.5463

Amount of Each Receipt this Period
795.00

C. Full Name (Last, First, Middle Initial)
JOHN J. COOPER

Mailing Address 329 BAYTREE LANE

City RALEIGH State NC Zip Code 27615

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

Name of Employer COMPASS NC Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5208

Amount of Each Receipt this Period
1000.00

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

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

2795.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
D CORUM

Mailing Address 1116 LAURENS WAY

City State Zip Code
KNIGHTDALE NC 27545

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

Name of Employer Occupation
AGCAROLINA FARM CREDIT PRESIDENT & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5210

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN MONROE COUNCIL

Mailing Address 2201 STERLING PLACE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
COUNCIL TOOL COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5252

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
JOHN R. CRALLE

Mailing Address 1232 PEMBROKE JONES DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.5059

Amount of Each Receipt this Period
250.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 20 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN R. CRALLE

Mailing Address 1232 PEMBROKE JONES DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5203

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
REX CREECH

Mailing Address PO BOX 15446

City State Zip Code
WILMINGTON NC 28408

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

Name of Employer Occupation
TOPLINE SOFTWARE SOLUTIONS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5281

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
HARRY R CULP

Mailing Address 500 WOODBROOK DRIVE

City State Zip Code
HIGH POINT NC 27262

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

Name of Employer Occupation
FIELDEN FAMILY DENTISTRY DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5179

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT CULP

Mailing Address 903 FOREST HILL DRIVE

City HIGHPOINT State NC Zip Code 27262

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

Name of Employer CULP Occupation FOUNDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5272

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
ROBERT DEGROOF

Mailing Address 4013 NEWHALL COURT

City SAINT JAMES State NC Zip Code 28461

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11AI.5106

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
ROBERT DEGROOF

Mailing Address 4013 NEWHALL COURT

City SAINT JAMES State NC Zip Code 28461

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period

100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER DEICHLER

Mailing Address **289 ELLIS CREEK DRIVE**

City **PITTSBORO** State **NC** Zip Code **27312**

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

Name of Employer **GLAXOSMITHKLINE** Occupation **DIRECTOR PHARMACUETICAL R&D**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5546

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RODNEY DILLMAN

Mailing Address **PO BOX 3154**

City **TOPSAIL BEACH** State **NC** Zip Code **28445**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.5493

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL DIMARTINO

Mailing Address **720 SOUTH DICKERSON STREET**

City **BURGAW** State **NC** Zip Code **28425**

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

Name of Employer **W.R. RAYSON CO., INC.** Occupation **PRESIDENT AND CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : SA11AI.5248

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JERALD DIMEO

Mailing Address 2159 JOELENE DRIVE

City State Zip Code
ROCKY MOUNT NC 27803

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

Name of Employer Occupation
FIRST CAROLINA MANAGEMENT, INC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5339

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH H. DOLE

Mailing Address 700 NEW HAMPSHIRE AVENUE, NW
SUITE 112

City State Zip Code
WASHINGTON DC 20037

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.5435

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
ROBERT J. DOLE

Mailing Address 700 NEW HAMPSHIRE AVENUE, NW

City State Zip Code
WASHINGTON DC 20037

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

Name of Employer Occupation
ALSTON & BIRD, LLP SPECIAL COUNSEL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11AI.5195

Amount of Each Receipt this Period
1000.00

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

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

3850.00

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

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

FOR LINE NUMBER: PAGE 24 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCKINLEY D. DULL

Mailing Address **5 W ASHEVILLE STREET**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480**

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

Name of Employer **MCKINLEY BUILDING CORP.** Occupation **BUILDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5342

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GEORGE S. DUNLOP

Mailing Address **1300 ARMY NAVY DRIVE #815**

City **ARLINGTON** State **VA** Zip Code **22202**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.5042

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JEFFREY R. DUNN

Mailing Address **7870 GODWIN LAKE ROAD**

City **DUNN** State **NC** Zip Code **28334**

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

Name of Employer **CAROLINA FIRE PROTECTION, INC.** Occupation **SALES REPRESENTATIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.5465

Amount of Each Receipt this Period
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EASTERN BAND OF CHEROKEE INDIANS

Mailing Address PO BOX 455

City: CHEROKEE State: NC Zip Code: 28719

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 07 / 31 / 2014

Transaction ID : SA11AI.5114

Amount of Each Receipt this Period: 2600.00

B. Full Name (Last, First, Middle Initial)
BRIAN C. ECKEL

Mailing Address 818 S. LUMINA

City: WRIGHTSVILLE BEACH State: NC Zip Code: 28480

FEC ID number of contributing federal political committee: C

Name of Employer: CAPE FEAR COMMERCIAL Occupation: PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 10 / 2014

Transaction ID : SA11AI.5343

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
N. KIRK EDGERTON

Mailing Address 9144 SUTHERLAND COURT

City: RALEIGH State: NC Zip Code: 27615

FEC ID number of contributing federal political committee: C

Name of Employer: HOMETOWNE REALTY Occupation: REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 21 / 2014

Transaction ID : SA11AI.5173

Amount of Each Receipt this Period: 150.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RUFUS L. EDMISTEN

Mailing Address 132 SOUTH SALISBURY STREET

City State Zip Code
RALEIGH NC 27601

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

Name of Employer Occupation
EDMISTEN LAW LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.5040

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
J. BRAD EDWARDS

Mailing Address 403 LLOYDS LANE

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
JENKINS HILL CONSULTING FEDERAL GOV'T AFFAIRS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.5207

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD EDWARDS

Mailing Address 1701 COUNTRY CLUB ROAD

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
HENRY SCHEIN DENTAL FIELD SALES CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5349

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABIGAIL EDWARDS

Mailing Address 305 E OLIVER STREET

City State Zip Code
WHITEVILLE NC 28472

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5261

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JESSICA RIFFLE EDWARDS

Mailing Address 1701 COUNTRY CLUB ROAD

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
COLDWELL BANKER REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5269

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
LESTER R. EDWARDS

Mailing Address 102 FOREST LANE

City State Zip Code
WILMINGTON NC 28401

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

Name of Employer Occupation
AMERICAN SKINS, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5337

Amount of Each Receipt this Period
1000.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONALD E. FADER

Mailing Address **PO BOX 1376**

City **KINSTON** State **NC** Zip Code **28503**

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

Name of Employer **SMC HOME FINANCE** Occupation **MORTGAGE LENDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.5398

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ANNE FAIRCLOTH

Mailing Address **207 N CHESTNUT STREET**

City **CLINTON** State **NC** Zip Code **28328**

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

Name of Employer **COHARIE FARMS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5620

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WILLIAM C. FIELD

Mailing Address **2348 OCEAN POINT DRIVE**

City **WILMINGTON** State **NC** Zip Code **28405**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : SA11AI.5219

Amount of Each Receipt this Period
300.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHILIP F. FINELLI

Mailing Address 11300 FARMLAND DRIVE

City State Zip Code
ROCKVILLE MD 20852

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

Name of Employer Occupation
PROACTIVE SCHOOL EVP, STRATEGIC PLANNING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : SA11AI.5085

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
HERBERT CARLTON FISHER

Mailing Address 1608 1/2 MARKET STREET

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
COASTAL REALTY CO. REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM M FOWLKES III

Mailing Address 250 CREEK DRIVE

City State Zip Code
GARNER NC 27529

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : SA11AI.5536

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES STEWART FREEMAN

Mailing Address 93 EDGEWATER LANE

City State Zip Code
WILMINGTON NC 28403

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FREEMAN LANDSCAPE, INC. LANDSCAPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5293

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES STEWART FREEMAN

Mailing Address 93 EDGEWATER LANE

City State Zip Code
WILMINGTON NC 28403

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FREEMAN LANDSCAPE, INC. LANDSCAPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5489

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CHRISTIAN L. GIBSON

Mailing Address 1209 MALLARD BAY ROAD

City State Zip Code
HAMPSTEAD NC 28443

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TI COASTAL SERVICES ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period

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

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

**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 31 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS GIBSON

Mailing Address 315 BARKER TEN MILE ROAD

City State Zip Code
LUMBERTON NC 28358

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

Name of Employer Occupation
FREEMAN MOTORS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.5517

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN GORDLEY

Mailing Address 600 PENNSYLVANIA AVENUE, SE
SUITE 320

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation
GORDLEY ASSOCIATES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5600

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FRANK D. GORHAM III

Mailing Address 142 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
SANDSTONE PROPERTIES, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.5314

Amount of Each Receipt this Period
3865.95

IN-KIND: FOOD/BEVERAGE

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

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

4865.95

**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 32 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) FRANK D. GORHAM III		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 142 BEACH ROAD SOUTH		Transaction ID : SA11AI.5316	
City WILMINGTON	State NC	Zip Code 28411	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2265.95	
Name of Employer SANDSTONE PROPERTIES, LLC	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00		
		[MEMO ITEM] REATTRIBUTED TO GORHAM, RAMSAY	

Full Name (Last, First, Middle Initial) RAMSAY GORHAM		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 142 BEACH ROAD SOUTH		Transaction ID : SA11AI.5317	
City WILMINGTON	State NC	Zip Code 28411	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2265.95	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2265.95		
		[MEMO ITEM] REATTRIBUTED FROM GORHAM, FRANK III	

Full Name (Last, First, Middle Initial) ADAIR GRAHAM		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 545 ARBORETUM DRIVE		Transaction ID : SA11AI.5167	
City WILMINGTON	State NC	Zip Code 28405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer BB&T SECURITIES	Occupation STOCK BROKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOLLY GRANGE

Mailing Address 8316 BALD EAGLE LANE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
CENTURY 21 REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DONALD M. GRAY

Mailing Address 1808 MEWS DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014

Transaction ID : SA11AI.5041

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
W TAYLOR GRIFFIN

Mailing Address PO BOX 3451

City State Zip Code
NEW BERN NC 28564

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

Name of Employer Occupation
HAMILTON PLACE STRATEGIES PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5211

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GORDON GRUBB

Mailing Address 1021 COWPER DRIVE

City State Zip Code
RALEIGH NC 27608

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

Name of Employer Occupation
GRUBB VENTURES REAL ESTATE DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5177

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
BARRY HALES

Mailing Address 9 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
WARREN R. HALL

Mailing Address 3025 BAKERS MEADOW

City State Zip Code
ATLANTA GA 30339

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

Name of Employer Occupation
ALTON & BYRD LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.5164

Amount of Each Receipt this Period
750.00

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

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

4250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONNA HALL

Mailing Address 2660 PEACHTREE ROAD
27-E

City ATLANTA State GA Zip Code 30305

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.5165

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
KENT HARRELL

Mailing Address 217 OXBOW LANDING

City BURGAW State NC Zip Code 28425

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

Name of Employer **LAW OFFICE OF R. KENT HARRELL, PC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.5320

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
PETER K. HEXTER JR

Mailing Address 1529 LANDFALL DRIVE

City WILMINGTON State NC Zip Code 28405

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

Name of Employer **BRAX LTD** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5084

Amount of Each Receipt this Period
1000.00

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

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

1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JENNIFER N. HIGGINS

Mailing Address 305 S PAYNE STREET
APARTMENT 306

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer CHAMBER HILL STRATEGIES Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5270

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KENDALL HILL

Mailing Address 2574 HUGO ROAD

City GRIFTON State NC Zip Code 28530

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

Name of Employer TULL HILL FARMS Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5406

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT K. HILL

Mailing Address 4445 RESEARCH FARM ROAD

City HOOKERTON State NC Zip Code 28538

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

Name of Employer TULL HILL FARMS Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5399

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAROLYN HILLIARD-BORDEAUX

Mailing Address 213 SATARA DRIVE

City State Zip Code
WILMINGTON NC 28412

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES A. HIVELY

Mailing Address 2005 SPANISH WELLS DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
ANLYAN & HIVELY PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
657.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5492

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES A. HIVELY

Mailing Address 2005 SPANISH WELLS DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
ANLYAN & HIVELY PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
657.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5526

Amount of Each Receipt this Period
157.99

IN-KIND: FOOD

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

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

1157.99

**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 38 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARJORIE G. HOLT

Mailing Address 1611 PUGH STREET

City FAYETTEVILLE State NC Zip Code 28305

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DAVID M. HONEYCUTT

Mailing Address 2225 TATTERSALLS DRIVE

City WILMINGTON State NC Zip Code 28403

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

Name of Employer CAPE FEAR PAVING Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RAYMOND K HOUSTON

Mailing Address 508 W PEARSALL STREET

City DUNN State NC Zip Code 28334

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

Name of Employer SELF EMPLOYED Occupation MUSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5455

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 39 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. C. HOWARD JR.

Mailing Address 1373 DAVIS MILL ROAD

City State Zip Code
DEEP RUN NC 28525

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

Name of Employer Occupation
J.C. HOWARD FARMS, LLC FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.5521

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RONALD V. JACKSON

Mailing Address 107 NE BOULEVARD

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
CLINTON TRUCK & TRACTOR COMPANY OWNER/PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 18 2014

Transaction ID : SA11AI.5407

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT A. JEFFREYS

Mailing Address 2026 HIGHWAY 70 WEST

City State Zip Code
GOLDSBORO NC 27530

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

Name of Employer Occupation
RA JEFFREYS DISTRIBUTION CO. BEVERAGE DISTRIBUTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 02 2014

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
1350.00
REFUNDED \$250.00 ON 9/30/2014

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RALPH JOHNSON

Mailing Address 403 BLOUNT STREET

City State Zip Code
CLINTON NC 28328

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PRESTAGE FARMS PURCHASING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5497

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES T JOHNSON

Mailing Address PO BOX 319

City State Zip Code
HARRELLS NC 28444

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5471

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JERRY B. JOHNSON

Mailing Address 1119 CANAL DRIVE

City State Zip Code
CAROLINA BEACH NC 28428

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5245

Amount of Each Receipt this Period

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

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

**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 41 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JERRY B. JOHNSON

Mailing Address 1119 CANAL DRIVE

City State Zip Code
CAROLINA BEACH NC 28428

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5543

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ALLAN JOHNSON

Mailing Address 53 WATERSIDE LANE

City State Zip Code
CAMDENTON MO 65020

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.5131

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DEBORAH M JOHNSON

Mailing Address 403 BLOUNT STREET

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
NC PORK COUNCIL CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
849.63

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EARL JOHNSON		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 6101 TRIANGLE DRIVE		Transaction ID : SA11AI.5101	
City RALEIGH	State NC	Zip Code 27617	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer SOUTHERN INDUSTRIAL EQUIPMENT	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. LIVIAN LAWRENCE JONES		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 7313 FISHERMAN CREEK DRIVE		Transaction ID : SA11AI.5351	
City WILMINGTON	State NC	Zip Code 28405	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer WM JORDAN	Occupation CONSTRUCTION		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. LIVIAN LAWRENCE JONES		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 7313 FISHERMAN CREEK DRIVE		Transaction ID : SA11AI.5531	
City WILMINGTON	State NC	Zip Code 28405	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer WM JORDAN	Occupation CONSTRUCTION		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**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 43 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WILBUR D JONES JR.		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 3002 JOY PLACE		Transaction ID : SA11AI.5367	
City WILMINGTON	State NC	Zip Code 28409	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SELF EMPLOYED	Occupation AUTHOR/MILITARY HISTORIAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. GEORGE THOMAS JOYNER		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 6452 SADDLEHORN DRIVE		Transaction ID : SA11AI.5213	
City ROCKY MOUNT	State NC	Zip Code 27803	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NASH PRODUCE CO	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) C. ALAN KESSEL		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2014	
Mailing Address 401 SUNDIAL COURT		Transaction ID : SA11AI.5105	
City WILMINGTON	State NC	Zip Code 28405	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer GEMROI COMPANY	Occupation SALES REP		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1600.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1500.00
TOTAL This Period (last page this line number only).....	_____

**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 44 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL G. KIDD

Mailing Address 116 HALSTEAD STREET

City: HOLDEN BEACH State: NC Zip Code: 28462

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 27 / 2014

Transaction ID : SA11AI.5515

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
PATRICK J. KOBALLA

Mailing Address 5 BAHAMA DRIVE

City: WRIGHTSVILLE BEACH State: NC Zip Code: 28480

FEC ID number of contributing federal political committee: C

Name of Employer: STEVENSON AUTO GROUP Occupation: CAR DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 10 / 2014

Transaction ID : SA11AI.5355

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
PATRICIA KUSEK

Mailing Address 1826 SIR TYLER DRIVE SUITE 265

City: WILMINGTON State: NC Zip Code: 28405

FEC ID number of contributing federal political committee: C

Name of Employer: KUSEK FINANCIAL GROUP Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 21 / 2014

Transaction ID : SA11AI.5174

Amount of Each Receipt this Period: 500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 45 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID MICHAEL LANDERS

Mailing Address 8200 KERRY RD

City State Zip Code
CHEVY CHASE MD 20815

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

Name of Employer Occupation
MANAGED FUNDS ASSOC. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.5366

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES H. LANGDON JR

Mailing Address 10176 NC 50 HIGHWAY NORTH

City State Zip Code
ANGIER NC 27501

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11AI.5065

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
JAMES H. LANGDON JR

Mailing Address 10176 NC 50 HIGHWAY NORTH

City State Zip Code
ANGIER NC 27501

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.5153

Amount of Each Receipt this Period
100.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONALD R. LATHAM

Mailing Address 1209 VANDERHORST WAY

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
PARKWAY AUTOMOTIVE GROUP AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.5161

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT J LEAHY

Mailing Address 622 JASMINE LANE

City State Zip Code
SUNSET BEACH NC 28468

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JEFFERY C. LEE

Mailing Address 5208 MEADOWBROOK ROAD

City State Zip Code
BENSON NC 27504

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

Name of Employer Occupation
LEE FARMS TOBACCO FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5209

Amount of Each Receipt this Period
2500.00

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

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

3550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN T. LEGGETT

Mailing Address 3593 WEST OLD SPRING HOPE ROAD

City State Zip Code
NASHVILLE NC 27856

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

Name of Employer Occupation
LEGGETT FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5215

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STEPHEN J. LEWIS

Mailing Address 6 POINT PLACE

City State Zip Code
WRIGHTSVILLE BEACH NC 28480

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5345

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CHOOMSANG LOHAVICHAN

Mailing Address 2 SOUNDS POINT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
LOHAVICHAN CHOOMSANG MD PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5283

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD A. LOZICK

Mailing Address 29425 CHAGRIN BOULEVARD
SUITE 201

City State Zip Code
PEPPER PIKE OH 44122

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

Name of Employer Occupation
SWAGELOK CHAIRMAN OF THE BOARD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
THOMAS F. LOZICK

Mailing Address 1069 ROYAL MILE

City State Zip Code
BIRMINGHAM AL 35242

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

Name of Employer Occupation
SWAGELOK ALABAMA PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : SA11AI.5154

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RODNEY MARTIN

Mailing Address 112 QUEENS CREEK ROAD
SUITE 1

City State Zip Code
SWANSBORO NC 28584

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

Name of Employer Occupation
BURGER KING FRANCHISE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.5478

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL E. MCCARLEY

Mailing Address 3330 RIVER ROAD

City State Zip Code
WILMINGTON NC 28412

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

Name of Employer Occupation
MARINE TERMINAL OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.5169

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY B. MCGEEVER

Mailing Address 581 GUY ROAD
SUITE 100

City State Zip Code
CLAYTON NC 27520

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

Name of Employer Occupation
MICROM ENGINEERED SYSTEMS NORTH CAROLINA MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11AI.5069

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARTY MCLENDON

Mailing Address PO BOX 10

City State Zip Code
LEARY GA 39862

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

Name of Employer Occupation
MCLENDON ACRES FARMER & ENTREPRENUER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.5433

Amount of Each Receipt this Period
1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHERRY B. MELTON		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 224 GOLDFIELD DRIVE		Transaction ID : SA11AI.5385	
City GARNER	State NC	Zip Code 27529	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer KEN MELTON & ASSOCIATES	Occupation SENIOR CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) B. HENRY E. MILLER		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 1713 N LUMINA AVENUE		Transaction ID : SA11AI.5340	
City WRIGHTSVILLE BEACH	State NC	Zip Code 28480	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. HENRY E. MILLER		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 119 LIVE OAK DRIVE		Transaction ID : SA11AI.5341	
City WRIGHTSVILLE BEACH	State NC	Zip Code 28480	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer M&N EQUIPMENT RENTALS INC.	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
F. DARRYL MILLS

Mailing Address 104 LEE'S CUT LANE

City: WRIGHTSVILLE BEACH State: NC Zip Code: 28480

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

Name of Employer: JACKSON, MILLS & CARTER, PA Occupation: ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 10 / 2014

Transaction ID : SA11AI.5336

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
F. DARRYL MILLS

Mailing Address 104 LEE'S CUT LANE

City: WRIGHTSVILLE BEACH State: NC Zip Code: 28480

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

Name of Employer: JACKSON, MILLS & CARTER, PA Occupation: ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
RAINELLE D. MISHOE

Mailing Address 825 FOX RIDGE LANE

City: WILMINGTON State: NC Zip Code: 28405

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

Name of Employer: INTRACOASTAL REALTY CORP Occupation: REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 325.00

Date of Receipt: 09 / 15 / 2014

Transaction ID : SA11AI.5506

Amount of Each Receipt this Period: 100.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HARMON W. MISHOE		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 825 FOX RIDGE LANE		Transaction ID : SA11AI.5507	
City WILMINGTON	State NC	Zip Code 28405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NATIONWIDE INSURANCE	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		

Full Name (Last, First, Middle Initial) B. LOREN L. MONROE		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 1733 FAIRVIEW AVENUE		Transaction ID : SA11AI.5113	
City MCLEAN	State VA	Zip Code 22101	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer BGR GROUP	Occupation GOVERNMENT AFFAIRS		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. MORONGO BAND OF MISSON INDIANS NATIVE AMERICAN RIGHTS FUND		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 12700 PUMARRA ROAD		Transaction ID : SA11AI.5509	
City BANNING	State CA	Zip Code 92220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 53 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MORT S. NEBLETT

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5088

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MORT S. NEBLETT

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MORT S. NEBLETT

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period
250.00

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

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

1650.00

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

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

FOR LINE NUMBER: PAGE 54 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PATRICK NETTLES

Mailing Address 186 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
CIENA CORPORATION CHAIRMAN OF THE BOARD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5180

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DEAN PAINTER

Mailing Address 4601 SIX FORKS ROAD SUITE 528

City State Zip Code
RALEIGH NC 27609

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

Name of Employer Occupation
RAVEN CAPITAL, INC CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5262

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOHN N. PANNULLO

Mailing Address 522 PRESERVE POINT, SW

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.5172

Amount of Each Receipt this Period
150.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN N. PANNULLO

Mailing Address 522 PRESERVE POINT, SW

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.5362

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
BHAVANI PARAMESWAR

Mailing Address 33 MALCOM ROAD

City State Zip Code
MAHWAH NJ 07430

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

Name of Employer Occupation
KING MAKER MARKETING, INC. BUSINESS MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DAVID H. PARKER

Mailing Address 1129 TAZWELL PLACE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
PARK STERLING BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period
250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KATHRYN PARKER

Mailing Address 2945 LAKEWOOD ROAD

City FOUR OAKS State NC Zip Code 27524

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

Name of Employer TAP CONSTRUCTION Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5255

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
BARRY W. PARTLO

Mailing Address 435 HIGHWAY 42 EAST

City CLAYTON State NC Zip Code 27527

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

Name of Employer DIRECT DISTRIBUTORS INC. Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.5467

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CHARLES A. PAUL III

Mailing Address 2217 MORELAND DRIVE

City WILMINGTON State NC Zip Code 28405

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

Name of Employer BALD HEAD ISLAND LIMITED, LLC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.5287

Amount of Each Receipt this Period
 150.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES A. PAUL III

Mailing Address 2217 MORELAND DRIVE

City State Zip Code
WILMINGTON NC 28405

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BALD HEAD ISLAND LIMITED, LLC CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5357

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
TROY ALLEN PEOPLES

Mailing Address 4701 LAWHORN STREET

City State Zip Code
RALEIGH NC 27606

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STANTEC CONSULTING VP, TRANSPORTATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5292

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAMES A. PERRY

Mailing Address 1602 CAMBRIDGE DRIVE

City State Zip Code
KINSTON NC 28504

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AFFORDABLE CARE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5400

Amount of Each Receipt this Period

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

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

**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 58 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMY LEANN PIERCE

Mailing Address 100 N 8TH STREET

City State Zip Code
CAROLINA BEACH NC 28428

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

Name of Employer Occupation
BLUE WATER REALTY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5487

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KAREN C PIGMAN

Mailing Address 65 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 23 / 2014

Transaction ID : SA11AI.5242

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
LEONARD S PIGMAN

Mailing Address 65 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
PIGMAN SALES, LLC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 23 / 2014

Transaction ID : SA11AI.5243

Amount of Each Receipt this Period
2600.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 59 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
C EDWARD PLEASANTS

Mailing Address 10 OYSTER CATCHER ROAD

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 23 2014

Transaction ID : SA11AI.5201

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
POINT DRIVE LLC

Mailing Address 118 POINT DRIVE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 25 2014

Transaction ID : SA11AI.5223

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOHN B. DALTON

Mailing Address 118 POINT DRIVE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
NEW HANOVER RENT-A-CAR/AVIS CAR RENTAL SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 25 2014

Transaction ID : SA11AI.5224

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
PARTNERSHIP POINT DRIVE LLC

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) WILLIAM G. PURVIS		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 2818 HYDRANGEA PLACE		Transaction ID : SA11AI.5354
City WILMINGTON	State NC	
Zip Code 28403	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer CAPE FEAR COMMERCIAL	Occupation MANAGING DIRECTOR	Election Cycle-to-Date 2000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) JULIAN WHITE RAWL		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 8068		Transaction ID : SA11AI.5633
City GREENVILLE	State NC	
Zip Code 27835	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00
Name of Employer PRESTON DEVELOPMENT	Occupation REAL ESTATE INVESTOR	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) RUSSELL H. RHODES JR.		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2014
Mailing Address 1501 GREENBRIAR ROAD		Transaction ID : SA11AI.5392
City KINSTON	State NC	
Zip Code 28501	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer NEUSE SPORT SHOP	Occupation PRESIDENT / CEO	Election Cycle-to-Date 250.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	

**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 61 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RANDY W. RICHARTZ

Mailing Address 2541 BRIDGEWATER COVE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RANDY W. RICHARTZ, CPA, PLLC CERTIFIED PUBLIC ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5622

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROBERT E. RICHTER

Mailing Address 16215 NE 25TH AVENUE

City State Zip Code
RIDGEFIELD WA 98642

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.5365

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JENNIFER J. RIPPY

Mailing Address 100 WINDLASS DRIVE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
WRIGHTSVILLE FARM MANAGEMENT PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period
1000.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLEN RIPPY

Mailing Address **6 MYRTLE COURT**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480**

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

Name of Employer **RIPPY CADILLAC** Occupation **DEALER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11AI.5313

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
JOHN R ROCKWELL

Mailing Address **300 CHATTOLANEE HILL ROAD**

City **OWINGS MILLS** State **MD** Zip Code **21117**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHERYL ROSE

Mailing Address **2687 OLD BAILEY HIGHWAY**

City **NASHVILLE** State **NC** Zip Code **27856**

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

Name of Employer **JR. ROSE & SONS, INC** Occupation **BOOKKEEPER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.5205

Amount of Each Receipt this Period
500.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHEREE B. ROSE

Mailing Address 2718 OLD BAILEY HIGHWAY

City State Zip Code
NASHVILLE NC 27856

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

Name of Employer Occupation
JB ROSE & SONS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11AI.5068

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
IRVIN AL ROSEMAN

Mailing Address 24 BACKFIN POINT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
IRVING A ROSEMAN, DDS ENDODONTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2838.57

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2014

Transaction ID : SA11AI.5043

Amount of Each Receipt this Period
1338.57

IN-KIND: FOOD/BEVERAGE/FACITILY RENTAL

C. Full Name (Last, First, Middle Initial)
GEORGE ROUNTREE III

Mailing Address 1960 HILLSBORO ROAD

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
ROUNTREE, LOSEE & BALDWIN, LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : SA11AI.5086

Amount of Each Receipt this Period
2600.00

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

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

4438.57

**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 64 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) SYLVIA ROUNTREE		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 1960 HILLSBORO ROAD		Transaction ID : SA11AI.5087
City WILMINGTON	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	Election Cycle-to-Date 5100.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) DEAN ROUSE		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 4894 LIDDELL ROAD		Transaction ID : SA11AI.5403
City SEVEN SPRINGS	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer M&R HOLDINGS, INC.	Occupation PRESIDENT / TOBACCONIST	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) ERIC ROUSE		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2856 ALTON PHILLIPS ROAD		Transaction ID : SA11AI.5396
City KINSTON	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer MODULAR SOLUTIONS	Occupation CONTRACTOR	Election Cycle-to-Date 250.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

**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 65 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TIM RYAN

Mailing Address **8080 WOODBERRY BOULEVARD**

City **CHAGRIN FALLS** State **OH** Zip Code **44023**

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

Name of Employer **GREAT LAKES GROWERS** Occupation **PRODUCE DISTRIBUTION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.5128

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
KIMBERLY SCHMIDLIN

Mailing Address **228 KILLINGTON PLACE**

City **DUNN** State **NC** Zip Code **28334**

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

Name of Employer **CAROLINA THERAPY SERVICES, INC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.5466

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
LINWOOD H. SCOTT

Mailing Address **7757 OSCAR LOOP**

City **LUCAMA** State **NC** Zip Code **27851**

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

Name of Employer **SCOTT FARMS, INC.** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.5214

Amount of Each Receipt this Period
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GREGORY R. SCOTT

Mailing Address 10711 MAPLECREST LANE

City POTOMAC State MD Zip Code 20854

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

Name of Employer GREGORY SCOTT CONSULTING Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.5410

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
THOMAS JAMES SEGRAVE

Mailing Address 3407 TIMBERLAKE COURT

City KINSTON State NC Zip Code 28504

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

Name of Employer DELTA AIRELITE Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5402

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
HARRY M. SHAW

Mailing Address PO BOX 1108

City CLINTON State NC Zip Code 28329

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

Name of Employer COASTAL CAROLINA PLUMBING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.5220

Amount of Each Receipt this Period
2600.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD D. SHELBY

Mailing Address 1119 INGLESIDE AVE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
AMERICAN GAS ASSOCIATION SENIOR VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11AI.5409

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BILLIE W. SHELTON

Mailing Address 6817 WEST ROBERTA ROAD

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11AI.5175

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BILLIE W. SHELTON

Mailing Address 6817 WEST ROBERTA ROAD

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.5393

Amount of Each Receipt this Period
200.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHENSON POPE SHUFORD

Mailing Address 1940 SHOREHAM DRIVE

City State Zip Code
CHARLOTTE NC 28211

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SHURTAPE TECHNOLOGIES, LLC CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
THOMAS D. SIMMONS

Mailing Address 1300 POST OAK BOULEVARD
SUITE 1650

City State Zip Code
HOUSTON TX 77056

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SIMMONS VEDDER PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5144

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
B LEON SKINNER

Mailing Address 108 N KERR AVENUE
SUITE K3

City State Zip Code
WILMINGTON NC 28405

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SOUTHERN HOME BUILDERS BUILDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5168

Amount of Each Receipt this Period

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

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

**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 69 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
B LEON SKINNER

Mailing Address 108 N KERR AVENUE
SUITE K3

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
SOUTHERN HOME BUILDERS BUILDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5333

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BURROWS G. SMITH

Mailing Address 131 SKYSTASAIL DRIVE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
SKINNER-SMITH CONSTRUCTONS REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.5202

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
G. GREGORY SMITH

Mailing Address 5201 HEDRICK DRIVE

City State Zip Code
GREENSBORO NC 27410

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

Name of Employer Occupation
GREENSBORO ANESTHESIA ANESTHESIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.5275

Amount of Each Receipt this Period
750.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEBBIE SLOANE SMITH

Mailing Address 16 CAUSEWAY DRIVE S.W.

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
OCEAN ISLE BEACH MAYOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CRAIG STEVENS

Mailing Address 20 SANDY POINT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
STEVENS FINE HOMES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
CRAIG STEVENS

Mailing Address 20 SANDY POINT

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
STEVENS FINE HOMES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.5149

Amount of Each Receipt this Period
-2400.00

[MEMO ITEM]
REATTRIBUTED TO STEVENS, JENNIE

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JENNIE STEVENS		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 20 SANDY POINT		Transaction ID : SA11AI.5150	
City WILMINGTON	State NC	Zip Code 28411	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C			
Name of Employer STEVENS FINE HOMES	Occupation VP OF MARKETING		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00		
			[MEMO ITEM] REATTRIBUTED FROM STEVENS, CRAIG

Full Name (Last, First, Middle Initial) B. DWIGHT R. STOGSDILL		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 819 FOX RIDGE LANE		Transaction ID : SA11AI.5249	
City WILMINGTON	State NC	Zip Code 28405	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1920.64		

Full Name (Last, First, Middle Initial) C. GARRETT STRICKLAND		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 441 HOLLINGSWORTH ROAD		Transaction ID : SA11AI.5469	
City MT OLIVE	State NC	Zip Code 28365	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**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 72 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REGINALD STRICKLAND

Mailing Address 1642 COUNTRY CLUB ROAD

City MOUNT OLIVE State NC Zip Code 28365

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

Name of Employer STRICKLAND FARMS, INC Occupation OWNER/FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.5451

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JANE C. SULLIVAN

Mailing Address PO BOX 3649

City WILMINGTON State NC Zip Code 28406

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

Name of Employer JH LAND, LLC Occupation MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
SCOTT C. SULLIVAN

Mailing Address PO BOX 3649

City WILMINGTON State NC Zip Code 28406

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

Name of Employer JH LAND, LLC Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5495

Amount of Each Receipt this Period
2600.00

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NICHOLAS LEE SWINSON

Mailing Address 681 TEARSHIRT ROAD

City MOUNT OLIVE State NC Zip Code 28365

FEC ID number of contributing federal political committee. C

Name of Employer GOLDEN GROVE Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.5312

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
AMY H. SWONGER

Mailing Address 5905 MOSS WOOD LANE

City MCLEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. C

Name of Employer WASHINGTON COUNCIL ERNST & YOUNG Occupation GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
JOHN J. TALBERT III

Mailing Address 1409 COUNTRY CLUB ROAD

City WILMINGTON State NC Zip Code 28403

FEC ID number of contributing federal political committee. C

Name of Employer TALBERT & BRIGHT, INC Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
 1000.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE RONALD TAYLOR

Mailing Address 2305 2ND AVENUE

City State Zip Code
ELIZABETHTOWN NC 28337

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

Name of Employer Occupation
TAYLOR MANUFACTURING PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.5514

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PETER J THOMAS

Mailing Address 109 DEER DRIVE

City State Zip Code
SILVER LAKE NH 03875

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.5291

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
PETER J THOMAS

Mailing Address 109 DEER DRIVE

City State Zip Code
SILVER LAKE NH 03875

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.5528

Amount of Each Receipt this Period
25.00

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

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

1075.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JODY SIMPSON THOMPSON

Mailing Address 5 N RIDGE LANE

City State Zip Code
WRIGHTSVILLE BEACH NC 28480

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5353

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CONSTANCE E. TIPTON

Mailing Address 1250 H STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation
INTERNATIONAL DAIRY FOODS ASSOCIATIC PRESIDENT & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.5453

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MICHAEL K. TORREY

Mailing Address 1514 NORTH FILLMORE STREET

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer Occupation
MICHAEL TORREY & ASSOCIATES, LLC FEDERAL GOVERNMENT AFFAIRS / PRINCI

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11AI.5411

Amount of Each Receipt this Period
400.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. MITCHELL TYLER

Mailing Address **PO BOX 222**

City **LAKE WACCAMAW** State **NC** Zip Code **28450**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5628

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WYATT UPCHURCH

Mailing Address **PO DRAWER 150**

City **REAFORD** State **NC** Zip Code **28376**

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

Name of Employer **WGU PORPERTIES, LLC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.5504

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CARL V. VENTERS

Mailing Address **148 EDGEWATER LANE**

City **WILMINGTON** State **NC** Zip Code **28403**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 12 / 2014

Transaction ID : SA11AI.5145

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEVIN G. WALKER

Mailing Address 464 CAUSEWAY DRIVE
#A

City State Zip Code
WRIGHTSVILLE BEACH NC 28480

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

Name of Employer Occupation
ATLANTIC DIVING & MARINE CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.5244

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
ROBERT F. WARWICK

Mailing Address 2000 MARSH HARBOR PLACE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
MCGLADREY LLP CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : SA11AI.5222

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT F. WARWICK

Mailing Address 2000 MARSH HARBOR PLACE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
MCGLADREY LLP CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period
200.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CALVIN F WELLS JR.

Mailing Address 1051 MILITARY CUTOFF ROAD
SUITE 200

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
CAPE FEAR COMMERCIAL REAL ESTATE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5344

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
J WALLACE WEST

Mailing Address 320 WAYNE DRIVE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
COASTAL CAROLINA STREETSCAPES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.5363

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROYA D. WEYERHAEUSER

Mailing Address 202 BEACH ROAD NORTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.5266

Amount of Each Receipt this Period
300.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DWIGHT S. WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 2427 ROANOKE ROAD		Transaction ID : SA11AI.5464	
City CLINTON	State NC	Zip Code 28328	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer AMERICAN FARM BUREAU	Occupation INSURANCE DIRECTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. CHARLES M. WINSTON		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 3739 NATIONAL DRIVE SUITE 140		Transaction ID : SA11AI.5277	
City RALEIGH	State NC	Zip Code 27612	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer WINSTON MANAGEMENT GROUP	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) C. LAURA B. WOOTEN		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 6000 CANADERO DRIVE		Transaction ID : SA11AI.5265	
City RALEIGH	State NC	Zip Code 27612	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 450.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2950.00
TOTAL This Period (last page this line number only).....	_____

**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 80 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WESLEY A. WOOTEN

Mailing Address 8155 MALPASS CORNER ROAD

City State Zip Code
CURRIE NC 28435

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11AI.5166

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
EVERETTE L. WOOTEN

Mailing Address 556 LAKELAND DRIVE

City State Zip Code
KINSTON NC 28540

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

Name of Employer Occupation
WOOTEN & COLEY ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5520

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BOYD WORLEY

Mailing Address 12067 SWAMP FOX HWY. W

City State Zip Code
CERRO GORDO NC 28430

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

Name of Employer Occupation
WRIGHT, WORLEY, POPE, EKSTER & MOSS, ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : SA11AI.5090

Amount of Each Receipt this Period
250.00

IN-KIND: FOOD

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 81 OF 166

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LYNN D. YOUNG

Mailing Address 2610 AUDUBON DRIVE

City Winston Salem State NC Zip Code 27106

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11A1.5276

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

170482.51

**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 82 OF 166
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOWER CAPE FEAR RW

Mailing Address **PO BOX 7635**

City **WILMINGTON** State **NC** Zip Code **28406**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **718.05**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11B.5127

Amount of Each Receipt this Period
718.05

NON-FEDERAL POLITICAL COMMITTEE;
FEDERALLY PERMISSIBLE SOURCES

B. Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address **320 FIRST STREET, SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00075820**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11B.5421

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1718.05

1718.05

**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 83 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. AFLAC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1932 WYNNNTON ROAD
 City State Zip Code
 COLUMBUS GA 31999
 FEC ID number of contributing federal political committee. **C C00034157**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11C.5423
 Amount of Each Receipt this Period
 1000.00

B. AMERICAN BAKERS ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 I STREET, NW
 SUITE 700 WEST
 City State Zip Code
 WASHINGTON DC 20005
 FEC ID number of contributing federal political committee. **C C00016386**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11C.5110
 Amount of Each Receipt this Period
 1000.00

C. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 CONNECTICUT AVENUE N.W.
 City State Zip Code
 WASHINGTON DC 20036
 FEC ID number of contributing federal political committee. **C C00004275**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014
Transaction ID : SA11C.5060
 Amount of Each Receipt this Period
 1500.00

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE N.W.

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11C.5063

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN CHIROPRACTIC ASSOCIATION PAC

Mailing Address 1701 CLARENDON BOULEVARD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.5475

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN CONSERVATIVE UNION PAC

Mailing Address 1007 CAMERON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00130658

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5415

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY PAC

Mailing Address 101 NORTH 3RD STREET

City MOOREHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5424

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN KENNEL CLUB INC PAC (AKC PAC)

Mailing Address 260 MADISON AVENUE
4TH FLOOR

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C** C00441808

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11C.5062

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN PEANUT SHELLERS ASSOCIATION PAC

Mailing Address PO BOX 70157

City ALBANY State GA Zip Code 31708

FEC ID number of contributing federal political committee. **C** C00214148

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5427

Amount of Each Receipt this Period
 2000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET
SUITE 225

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5610

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AXEON SPRECIALTY PRODUCTS LLC PAC

Mailing Address 400 GROVE ROAD

City State Zip Code
WEST DEPTFORD NJ 08066

FEC ID number of contributing federal political committee. **C** C00551960

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11C.5285

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BLOOMIN' BRANDS, INC. PAC

Mailing Address 2202 N. WEST SHORE BLVD.

City State Zip Code
TAMPA FL 33607

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5429

Amount of Each Receipt this Period
2000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION (BSC) PAC

Mailing Address 300 BOSTON SCIENTIFIC WAY

City State Zip Code
MARLBOROUGH NC 01752

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5608

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BUILD PAC OF THE NATIONAL ASSOCIATION OF HOMEBUILDERS

Mailing Address 1201 15TH STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11C.5251

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BUILD PAC OF THE NATIONAL ASSOCIATION OF HOMEBUILDERS

Mailing Address 1201 15TH STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5598

Amount of Each Receipt this Period
2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BURGER KING FRANCHISEE PAC

Mailing Address 1701 BARRETT LAKES BOULEVARD NW
SUITE 180

City KENNESAW State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.5476

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
COLLINS FOR CONGRESS

Mailing Address PO BOX 1295

City GAINESVILLE State GA Zip Code 30503

FEC ID number of contributing federal political committee. **C** C00502039

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5416

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBC UNIVERSAL PAC - FEDERAL

Mailing Address 1701 JFK BOULEVARD
49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5604

Amount of Each Receipt this Period
 2000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 89 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COMM FOR THE ADVANCEMENT OF SE COTTON (CASC) PAC, SOUTHERN COTTENGROWERS,
 Mailing Address 139 PROMINENCE COURT
 SUITE 110
 City Dawsonville State GA Zip Code 30534
 FEC ID number of contributing federal political committee. **C** C00300426
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11C.5383
 Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
CONCORDIA PAC
 Mailing Address PO BOX 232
 City Ashburn State GA Zip Code 31714
 FEC ID number of contributing federal political committee. **C** C00450866
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11C.5434
 Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CORNING INCORPORATED EMPLOYEES (CORE) PAC
 Mailing Address 325 7TH STREET, NW
 SUITE 600
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00033589
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11C.5503
 Amount of Each Receipt this Period
 2000.00

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. CROP INSURANCE PROFESSIONALS ASSOCIATION (CIPA) PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S. WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00503680**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5422

Amount of Each Receipt this Period
 1000.00

B. DEERE & COMPANY PAC (AKA JOHN DEERE PAC)

Full Name (Last, First, Middle Initial)
Mailing Address ONE JOHN DEERE PLACE

City MOLINE State IL Zip Code 61265

FEC ID number of contributing federal political committee. **C C00204099**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5611

Amount of Each Receipt this Period
 5000.00

C. DOMINION RESOURCES PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 26666

City RICHMOND State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C C00108209**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5607

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EXELON CORPORATION PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5609

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION PAC

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11C.5082

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
FIRST CITIZENS BANCSHARES INC PAC FEDERAL

Mailing Address PO BOX 27131

City RALEIGH State NC Zip Code 27611

FEC ID number of contributing federal political committee. **C** C00334193

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.5391

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FOOD MARKETING INSTITUTE PAC (FOOD PAC)

Mailing Address 2345 CRYSTAL DRIVE
SUITE 800

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00014555**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5430

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GLAXOSMITHKLINE LLC PAC (GSK PAC)

Mailing Address FIVE MOORE DRIVE
PO BOX 13358

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C C00199703**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5605

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
GOOGLE NETPAC

Mailing Address 25 MASSACHUSETTS AVENUE, NW
9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11C.5155

Amount of Each Receipt this Period
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HALLIBURTON COMPANY PAC (HALPAC)

Mailing Address 801 17TH STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00035691**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11C.5284

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11C.5151

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
IMPACT COMMITTEE

Mailing Address 100 LUNA PARK DRIVE
SUITE 156

City ALEXANDRIA State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C C00525238**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5510

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL PAPER (IP) PAC

Mailing Address 1101 PENNSYLVANIA AVENUE, NW
SUITE 200

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11C.5111

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW
SUITE 300

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11C.5196

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
JM FAMILY ENTERPRISES, INC. PAC

Mailing Address 111 JIM MORAN BOULEVARD

City State Zip Code
DEERFIELD BEACH FL 33442

FEC ID number of contributing federal political committee. **C** C00240911

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11C.5156

Amount of Each Receipt this Period
1500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES, INC (KOCH) PAC

Mailing Address 600 14TH STREET, NW
SUITE 800

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.5616

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE (MC) PAC

Mailing Address PO BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11C.5428

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES (MP) PAC FEDERAL

Mailing Address 539 SOUTH MAIN STREET
ROOM 2635

City State Zip Code
FINDLAY OH 45840

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11C.5253

Amount of Each Receipt this Period
2500.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARYLAND & VIRGINIA MILK PRODUCERS COOPERATIVE ASSOCIATION INC. PAC

Mailing Address **1985 ISAAC NEWTON SQUARE WEST**

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing federal political committee. **C C00363069**

Name of Employer	Occupation

Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2014

Transaction ID : SA11C.5606

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
MCDONALDS CORPORATION PAC

Mailing Address **2111 MCDONALD'S DRIVE**

City	State	Zip Code
OAK BROOK	IL	60523

FEC ID number of contributing federal political committee. **C C00063164**

Name of Employer	Occupation

Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2014

Transaction ID : SA11C.5523

Amount of Each Receipt this Period
 _____ 2500.00

C. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address **228 S. WASHINGTON STREET
SUITE 115**

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee. **C C00540187**

Name of Employer	Occupation

Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4593.45
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		24		2014

Transaction ID : SA11C.5474

Amount of Each Receipt this Period
 _____ 1000.00

SUBTOTAL of Receipts This Page (optional).....	_____ 4500.00
TOTAL This Period (last page this line number only).....	_____

**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 97 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF FARM SERVICE AGENCY COUNTY OFFICE EMPLOYEES INC PPC AKA NASCOE PAC

A. Mailing Address 313 MASSACHUSETTS AVENUE NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C** C00413567

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5412

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION PEANUT BUYING POINT PAC

Mailing Address PO BOX 314

City State Zip Code
TIFTON GA 31793

FEC ID number of contributing federal political committee. **C** C00374298

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5414

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL PAC

Mailing Address 1152 FIFTEENTH STREET, NW
SUITE 430

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11C.5115

Amount of Each Receipt this Period
 2000.00

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

4000.00

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

**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 98 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS (NFIB)/SAVE AMERICAS FREE ENTERPRISE (SAFE) TR

A. Mailing Address 1201 F STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5508

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
NATIONAL OCEAN INDUSTRIES ASSOCIATION (NOIA) PAC

B. Mailing Address 1120 G STREET
SUITE 900

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11C.5162

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
NATIONAL PORK PRODUCERS COUNCIL PAC

C. Mailing Address PO BOX 10383

City DES MOINES State IA Zip Code 50306

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11C.5152

Amount of Each Receipt this Period
5000.00

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL RURAL ELECTRIC COOPERATIVE ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) PAC

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11C.5256

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL TURKEY FEDERATION PAC (TURPAC)

Mailing Address 1225 NEW YORK AVENUE SUITE 400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5419

Amount of Each Receipt this Period
 3000.00

C. Full Name (Last, First, Middle Initial)
NORTH CAROLINA COTTON PRODUCERS ASSOCIATION COMMITTEE (NCC) PAC

Mailing Address PO BOX 656

City NASHVILLE State NC Zip Code 27856

FEC ID number of contributing federal political committee. **C** C00416297

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.5384

Amount of Each Receipt this Period
 2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OCCIDENTAL PETROLEUM CORPORATION PAC

Mailing Address 10889 WILSHIRE BOULEVARD

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11C.5273

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
OLD DOMINION FREIGHT LINE, INC PAC

Mailing Address 500 OLD DOMINION WAY

City State Zip Code
THOMASVILLE NC 27360

FEC ID number of contributing federal political committee. **C C00496836**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11C.5279

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
OUR COUNTRY DESERVES BETTER PAC

Mailing Address PO BOX 984

City State Zip Code
WILLOWS CA 95988

FEC ID number of contributing federal political committee. **C C00454074**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5525

Amount of Each Receipt this Period
1000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PEANUTPAC OF ALABAMA

Mailing Address **PO BOX 10182**

City **DOTHAN** State **AL** Zip Code **36304**

FEC ID number of contributing federal political committee. **C C00211037**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11C.5426

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
RAIN AND HAIL INSURANCE SOCIETY PAC

Mailing Address **9200 NORTHPARK DRIVE
SUITE 300**

City **JOHNSTON** State **IA** Zip Code **50131**

FEC ID number of contributing federal political committee. **C C00279505**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11C.5425

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
RENEWABLE FUELS ASSOCIATION (RENEWABLE FUELS PAC)

Mailing Address **PO BOX 3080 RT. 9**

City **NEW GRETN** State **NJ** Zip Code **08224**

FEC ID number of contributing federal political committee. **C C00518910**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11C.5413

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (R.O.S.K.A.M) PAC

Mailing Address **610 S. BOULEVARD**

City	State	Zip Code
TAMPA	FL	33606

FEC ID number of contributing federal political committee. **C C00451294**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	25	/	2014

Transaction ID : SA11C.5462

Amount of Each Receipt this Period
 _____ 5000.00

B. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL (SRI) PAC

Mailing Address **4800 W. GATES PASS ROAD**

City	State	Zip Code
TUSCON	AZ	85745

FEC ID number of contributing federal political committee. **C C00122101**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	18	/	2014

Transaction ID : SA11C.5418

Amount of Each Receipt this Period
 _____ 2000.00

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address **PO BOX 23219**

City	State	Zip Code
JEFFERSON	LA	70183

FEC ID number of contributing federal political committee. **C C00394957**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11C.5601

Amount of Each Receipt this Period
 _____ 2000.00

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

_____ 9000.00

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

**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 103 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STAND TALL AMERICA PAC (STAPAC)

Mailing Address PO BOX 2382

City State Zip Code
AMARILLO TX 79105

FEC ID number of contributing federal political committee. **C** C00404418

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11C.5254

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
THE CATERPILLAR, INC. EMPLOYEE PAC

Mailing Address 100 NE ADAMS STREET

City State Zip Code
PEORIA IL 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
12000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11C.5112

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address PO BOX 1734

City State Zip Code
ATLANTA GA 30301

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5417

Amount of Each Receipt this Period
1000.00

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 104 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address 320 FIRST STREET, SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5420

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
UNITED STATES PEANUT PAC (US PEANUT PAC)

Mailing Address 313 MASSACHUSETTS AVE, NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C C00502807**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5432

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES CORPORATION PAC

Mailing Address 1101 PENNSYLVANIA AVENUE, NW
10TH FLOOR

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5603

Amount of Each Receipt this Period
2000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
USA RICE FEDERATION PAC

Mailing Address 4301 NORTH FAIRFAX DRIVE
SUITE 425

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C C00308478**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.5602

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
VIRGINIA-CAROLINA'S PEANUT ASSOCIATION PAC

Mailing Address PO BOX 8

City NASHVILLE State NC Zip Code 27856

FEC ID number of contributing federal political committee. **C C00185652**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.5206

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VOICE FOR FREEDOM

Mailing Address 2700 CUMBERLAND PARKWAY
SUITE 150

City ATLANTA State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C C00409805**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.5431

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WARD AND SMITH, PA PAC

Mailing Address **PO BOX 867**

City **NEW BERN** State **NC** Zip Code **28563**

FEC ID number of contributing federal political committee. **C C00491506**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.5599

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
WOODALL FOR CONGRESS

Mailing Address **PO BOX 1871**

City **LAWRENCEVILLE** State **GA** Zip Code **30046**

FEC ID number of contributing federal political committee. **C C00482307**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.5612

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

6000.00

140850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID ROUZER

Mailing Address 108 PEACH ORCHARD DRIVE

City Benson State NC Zip Code 27504

FEC ID number of contributing federal political committee. **C H2NC07096**

Name of Employer THE ROUZER COMPANY Occupation BUSINESS CONSULTANT / PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **79898.99**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11D.5646

Amount of Each Receipt this Period
 5532.24

IN-KIND: MILEAGE

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5532.24

5532.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. A & M SCREENPRINTING			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 2725 OLD WRIGHTSBORO ROAD BUILDING 14 UNIT 4			Amount of Each Disbursement this Period 484.71	
City WILMINGTON	State NC	Zip Code 28405	Transaction ID : SB17.5555	
Purpose of Disbursement PRINTING		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN STATIONERY			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 100 N. PARK AVENUE			Amount of Each Disbursement this Period 90.75	
City PERU	State IN	Zip Code 46970	Transaction ID : SB17.5135	
Purpose of Disbursement STATIONERY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN STATIONERY			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 100 N. PARK AVENUE			Amount of Each Disbursement this Period 95.75	
City PERU	State IN	Zip Code 46970	Transaction ID : SB17.5438	
Purpose of Disbursement STATIONERY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	671.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.27 Transaction ID : SB17.5056
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5096
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5109
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5108
Candidate Name	003 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) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5107
Candidate Name	003 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) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5132
Candidate Name	003 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:		

SUBTOTAL of Disbursements This Page (optional)..... 28.20
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5159
Candidate Name	003 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) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5185
Candidate Name	003 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) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5181
Candidate Name	003 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:		

SUBTOTAL of Disbursements This Page (optional).....	61.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 98.40 Transaction ID : SB17.5182
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5183
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 58.80 Transaction ID : SB17.5184
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	98.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 101.70 Transaction ID : SB17.5240
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 101.70 Transaction ID : SB17.5241
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5236
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	223.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.5237
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5238
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 101.70 Transaction ID : SB17.5239
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	160.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5235
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.5233
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5234
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	49.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5304
Candidate Name	003 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) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5305
Candidate Name	003 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) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5306
Candidate Name	003 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:		

SUBTOTAL of Disbursements This Page (optional).....	80.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5303
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 8.10 Transaction ID : SB17.5331
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 6.15 Transaction ID : SB17.5330
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5329
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5328
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.66 Transaction ID : SB17.5375
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	25.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5374
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.5371
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5372
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	61.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.5373
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 8.10 Transaction ID : SB17.5448
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.5449
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	57.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5596
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5446
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.5447
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5445
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5571
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5572
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	26.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5573
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5574
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5575
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.27 Transaction ID : SB17.5576
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.5569
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5570
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.5568
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.27 Transaction ID : SB17.5566
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.5567
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	13.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 4.20	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.5556	
Purpose of Disbursement CREDIT CARD FEE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 4.20	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.5557	
Purpose of Disbursement CREDIT CARD FEE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 19.80	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.5558	
Purpose of Disbursement CREDIT CARD FEE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	28.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5559
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5560
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5561
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	59.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5562
Candidate Name	003 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) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5563
Candidate Name	003 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) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.5564
Candidate Name	003 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:		

SUBTOTAL of Disbursements This Page (optional).....	51.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.5565
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CANDIDATE COMMAND, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1420 NW VIVION SUITE 113		Amount of Each Disbursement this Period 2563.00 Transaction ID : SB17.5378
City KANSAS CITY	State MO	
Zip Code 64118	Purpose of Disbursement PRINTING	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CAPITAL CITY MAIL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 2660-124 DISCOVERY DRIVE		Amount of Each Disbursement this Period 135.76 Transaction ID : SB17.5381
City RALEIGH	State NC	
Zip Code 27616	Purpose of Disbursement PRINTING/POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2718.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL SUITES			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 200 C STREET, SE			Amount of Each Disbursement this Period 143.24 Transaction ID : SB17.5232
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement HOTEL		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. COMMONWEALTH COMMERCIAL PROPERTIES			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1508 MILITARY CUTOFF ROAD SUITE 106			Amount of Each Disbursement this Period 8750.00 Transaction ID : SB17.5123
City WILMINGTON	State NC	Zip Code 28403	
Purpose of Disbursement RENT		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. CRICKET			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 5887 COPLEY DRIVE			Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.5095
City SAN DIEGO	State CA	Zip Code 92111	
Purpose of Disbursement MOBILE PHONE SERVICES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	9273.74
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRICKET		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 5887 COPLEY DRIVE		Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.5190
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement MOBILE PHONE SERVICES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CRICKET		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 5887 COPLEY DRIVE		Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.5460
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement MOBILE PHONE SERVICES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DAVID'S DELI & RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO BOX 1332		Amount of Each Disbursement this Period 170.13 Transaction ID : SB17.5092
City WRIGHTSVILLE BEACH	State NC	
Zip Code 28480	Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	931.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.4957
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5139
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5298
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER J FOOTE			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112			Amount of Each Disbursement this Period 3670.50	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.4927	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. TYLER J FOOTE			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112			Amount of Each Disbursement this Period 3593.26	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.5070	
Purpose of Disbursement REIMBURSEMENT: TRAVEL/FOOD/POSTAGE/MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. TYLER J FOOTE			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112			Amount of Each Disbursement this Period 3670.50	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.5122	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	10934.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER J FOOTE		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112		Amount of Each Disbursement this Period 3670.50 Transaction ID : SB17.5229
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FRANK D. GORHAM III		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 142 BEACH ROAD SOUTH		Amount of Each Disbursement this Period 3865.95 Transaction ID : SB17.5315
City WILMINGTON State NC Zip Code 28411	Purpose of Disbursement IN-KIND: FOOD/BEVERAGE Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HARRIS TEETER		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 10100		Amount of Each Disbursement this Period 299.07 Transaction ID : SB17.5458
City MATTHEWS State NC Zip Code 28106	Purpose of Disbursement FOOD/BEVERAGE Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7835.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOME DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 2455 PACES FERRY ROAD		Amount of Each Disbursement this Period 198.49
City ATLANTA State GA Zip Code 30399	Purpose of Disbursement SIGNS 001 Category/Type	
Candidate Name		Transaction ID : SB17.5370
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 3000.00
City RALEIGH State NC Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING 001 Category/Type	
Candidate Name		Transaction ID : SB17.4955
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 3000.00
City RALEIGH State NC Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING 001 Category/Type	
Candidate Name		Transaction ID : SB17.5071
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6198.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.5188
City RALEIGH	State NC	
Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.5377
City RALEIGH	State NC	
Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 2705.25 Transaction ID : SB17.4925
City WILMINGTON	State NC	
Zip Code 28412	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10705.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 170.88 Transaction ID : SB17.4979
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: TRAVEL/MEALS/POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 425.19 Transaction ID : SB17.5098
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: MILEAGE/PARKING 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 2705.25 Transaction ID : SB17.5120
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3301.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 809.48 Transaction ID : SB17.5189
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: MILEAGE/FOOD Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 2705.25 Transaction ID : SB17.5227
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 1194.91 Transaction ID : SB17.5382
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: MILEAGE/FOOD Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4709.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LN CONSULTING		Date of Disbursement MM / DD / YYYY 07 / 12 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.4954
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LN CONSULTING		Date of Disbursement MM / DD / YYYY 08 / 23 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.5141
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LN CONSULTING		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5300
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAJORITY CONNECTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 10 PINNACLE ROAD		Amount of Each Disbursement this Period 3075.97 Transaction ID : SB17.4956
City DURHAM State NC Zip Code 27705	Purpose of Disbursement MEDIA CONSULTING/REIMBURSEMENT ADVERTISING-INTERNET Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MAJORITY CONNECTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address 10 PINNACLE ROAD		Amount of Each Disbursement this Period 3235.97 Transaction ID : SB17.5142
City DURHAM State NC Zip Code 27705	Purpose of Disbursement MEDIA CONSULTING/REIMBURSEMENT ADVERTISING-INTERNET Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MAJORITY CONNECTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 10 PINNACLE ROAD		Amount of Each Disbursement this Period 3517.97 Transaction ID : SB17.5299
City DURHAM State NC Zip Code 27705	Purpose of Disbursement MEDIA CONSULTING/REIMBURSEMENT ADVERTISING-INTERNET Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9829.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. METRO MAILING AND PRINTING		Date of Disbursement
Mailing Address 109 WINONA STREET		M M / D D / Y Y Y Y 07 / 18 / 2014
City CHARLOTTE	State NC	Amount of Each Disbursement this Period
Zip Code 28203		664.53
Purpose of Disbursement PRINTING/POSTAGE	Category/Type 003	Transaction ID : SB17.5072
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. METRO MAILING AND PRINTING		Date of Disbursement
Mailing Address 109 WINONA STREET		M M / D D / Y Y Y Y 08 / 29 / 2014
City CHARLOTTE	State NC	Amount of Each Disbursement this Period
Zip Code 28203		1092.52
Purpose of Disbursement PRINTING/POSTAGE	Category/Type 003	Transaction ID : SB17.5230
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. METRO MAILING AND PRINTING		Date of Disbursement
Mailing Address 109 WINONA STREET		M M / D D / Y Y Y Y 09 / 05 / 2014
City CHARLOTTE	State NC	Amount of Each Disbursement this Period
Zip Code 28203		453.74
Purpose of Disbursement POSTAGE	Category/Type 003	Transaction ID : SB17.5301
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2210.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. METRO MAILING AND PRINTING			Date of Disbursement										
Mailing Address 109 WINONA STREET			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>12</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		12		2014
M M	/	D D	/	Y Y Y Y									
09		12		2014									
City	State	Zip Code	Amount of Each Disbursement this Period										
CHARLOTTE	NC	28203											
Purpose of Disbursement PRINTING		Category/ Type	<table border="1"> <tr> <td>108.21</td> </tr> </table>	108.21									
108.21													
Candidate Name		006											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:												

Transaction ID : SB17.5327

Full Name (Last, First, Middle Initial) B. METRO MAILING AND PRINTING			Date of Disbursement										
Mailing Address 109 WINONA STREET			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		19		2014
M M	/	D D	/	Y Y Y Y									
09		19		2014									
City	State	Zip Code	Amount of Each Disbursement this Period										
CHARLOTTE	NC	28203											
Purpose of Disbursement PRINTING		Category/ Type	<table border="1"> <tr> <td>160.48</td> </tr> </table>	160.48									
160.48													
Candidate Name		003											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:												

Transaction ID : SB17.5379

Full Name (Last, First, Middle Initial) C. METRO MAILING AND PRINTING			Date of Disbursement										
Mailing Address 109 WINONA STREET			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		26		2014
M M	/	D D	/	Y Y Y Y									
09		26		2014									
City	State	Zip Code	Amount of Each Disbursement this Period										
CHARLOTTE	NC	28203											
Purpose of Disbursement PRINTING/POSTAGE		Category/ Type	<table border="1"> <tr> <td>1095.55</td> </tr> </table>	1095.55									
1095.55													
Candidate Name		003											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:												

Transaction ID : SB17.5441

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>1364.24</td> </tr> </table>	1364.24
1364.24		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MY CAMPAIGN STORE		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO BOX 596		Amount of Each Disbursement this Period 4075.70 Transaction ID : SB17.5296
City JEFFERSONVILLE	State IN	
Zip Code 47131	Purpose of Disbursement SIGNS	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NC DEPARTMENT OF COMMERCE DIVISION OF EMPLOYMENT SECURITY		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO BOX 26504		Amount of Each Disbursement this Period 292.80 Transaction ID : SB17.5051
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NOPA KITCHEN & BAR		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 800 F STREET, NW		Amount of Each Disbursement this Period 487.83 Transaction ID : SB17.5116
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4856.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NORTH CAROLINA DEPARTMENT OF REVENUE			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 501 N. WILMINGTON STREET			Amount of Each Disbursement this Period 530.00	
City RALEIGH	State NC	Zip Code 27604	Transaction ID : SB17.4971	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NORTH CAROLINA DEPARTMENT OF REVENUE			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 501 N. WILMINGTON STREET			Amount of Each Disbursement this Period 530.00	
City RALEIGH	State NC	Zip Code 27604	Transaction ID : SB17.5119	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. NORTH CAROLINA DEPARTMENT OF REVENUE			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 501 N. WILMINGTON STREET			Amount of Each Disbursement this Period 530.00	
City RALEIGH	State NC	Zip Code 27604	Transaction ID : SB17.5307	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1590.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. O3 STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address PO BOX 25363			Amount of Each Disbursement this Period 50.00	
City RALEIGH	State NC	Zip Code 27611	Transaction ID : SB17.4943	
Purpose of Disbursement WEBSITE SERVICES		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. O3 STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address PO BOX 25363			Amount of Each Disbursement this Period 50.00	
City RALEIGH	State NC	Zip Code 27611	Transaction ID : SB17.5117	
Purpose of Disbursement WEBSITE SERVICES		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. O3 STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014	
Mailing Address PO BOX 25363			Amount of Each Disbursement this Period 50.00	
City RALEIGH	State NC	Zip Code 27611	Transaction ID : SB17.5295	
Purpose of Disbursement WEBSITE SERVICES		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 6600 NORTH MILITARY TRAIL		Amount of Each Disbursement this Period 74.35
City BOCA RATON State FL Zip Code 33496	Purpose of Disbursement OFFICE SUPPLIES 007 Category/Type	
Candidate Name		Transaction ID : SB17.5226
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 6600 NORTH MILITARY TRAIL		Amount of Each Disbursement this Period 10.69
City BOCA RATON State FL Zip Code 33496	Purpose of Disbursement STATIONERY 001 Category/Type	
Candidate Name		Transaction ID : SB17.5325
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 6600 NORTH MILITARY TRAIL		Amount of Each Disbursement this Period 24.60
City BOCA RATON State FL Zip Code 33496	Purpose of Disbursement FUNDRAISING SUPPLIES 003 Category/Type	
Candidate Name		Transaction ID : SB17.5459
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	109.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 253.79
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement REIMBURSEMENT: TRAVEL Category/Type 004	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : SB17.5052

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 10000.00
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement MEDIA CONSULTING Category/Type 004	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : SB17.5053

Full Name (Last, First, Middle Initial) C. OORBEEK MOREHOUSE STRATEGIES, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 412 SOUTH CAPITOL STREET, SE SUITE B		Amount of Each Disbursement this Period 9278.96
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 003	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : SB17.5376

SUBTOTAL of Disbursements This Page (optional).....	19532.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAPER MART			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014	
Mailing Address 2164 N. BATAVIA STREET			Amount of Each Disbursement this Period 57.21	
City ORANGE	State CA	Zip Code 92865	Transaction ID : SB17.5079	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. PC SIGNS & GRAPHICS			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 180 HEIN DRIVE			Amount of Each Disbursement this Period 625.00	
City GARNER	State NC	Zip Code 27529	Transaction ID : SB17.5380	
Purpose of Disbursement PRINTING		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. PUBLIC OPINION STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014	
Mailing Address 214 NORTH FAYETTE STREET			Amount of Each Disbursement this Period 22000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.5137	
Purpose of Disbursement SURVEY		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	22682.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. IRVIN AL ROSEMAN		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 24 BACKFIN POINT		Amount of Each Disbursement this Period 1338.57
City WILMINGTON	State NC	
Zip Code 28411	Purpose of Disbursement IN-KIND: FOOD/BEVERAGE/FACILITY RENTAL	Transaction ID : SB17.5044
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) B. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 446.18
City BENSON	State NC	
Zip Code 27504	Purpose of Disbursement REIMBURSEMENT: HOTEL	Transaction ID : SB17.5191
Candidate Name DAVID ROUZER	Category/Type 002	
Office Sought: <input checked="" 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: NC District: 07		

Full Name (Last, First, Middle Initial) C. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 5532.24
City BENSON	State NC	
Zip Code 27504	Purpose of Disbursement IN-KIND: MILEAGE	Transaction ID : SB17.5647
Candidate Name DAVID ROUZER	Category/Type	
Office Sought: <input checked="" 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: NC District: 07		

SUBTOTAL of Disbursements This Page (optional).....	7316.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 925.53 Transaction ID : SB17.5693
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT: HOTEL, PARKING, CAB FARE 002 Category/Type	
Candidate Name DAVID ROUZER	Office Sought: <input checked="" 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: NC District: 07		

Full Name (Last, First, Middle Initial) B. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 1939.75 Transaction ID : SB17.4926
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 178.04 Transaction ID : SB17.4958
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: MILEAGE/BEVERAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3043.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 65.09 Transaction ID : SB17.5054
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: POSTAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17.5097
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT: EQUIPMENT RENTAL Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 1939.75 Transaction ID : SB17.5121
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2050.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZABETH R SEIDEL			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014	
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101			Amount of Each Disbursement this Period 181.90	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.5160	
Purpose of Disbursement REIMBURSEMENT: FOOD/MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ELIZABETH R SEIDEL			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014	
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101			Amount of Each Disbursement this Period 1939.75	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.5228	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. THE FORD FIRM, PLLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014	
Mailing Address PO BOX 701			Amount of Each Disbursement this Period 487.50	
City CLAYTON	State NC	Zip Code 27528	Transaction ID : SB17.4953	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2609.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE FORD FIRM, PLLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014	
Mailing Address PO BOX 701			Amount of Each Disbursement this Period 1262.50	
City CLAYTON	State NC	Zip Code 27528	Transaction ID : SB17.5140	
Purpose of Disbursement COMPLIANCE CONSULTING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. THE FORD FIRM, PLLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address PO BOX 701			Amount of Each Disbursement this Period 687.50	
City CLAYTON	State NC	Zip Code 27528	Transaction ID : SB17.5302	
Purpose of Disbursement COMPLIANCE CONSULTING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. THE UPS STORE			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 6060 CORNERSTONE COURT, W			Amount of Each Disbursement this Period 661.22	
City SAN DIEGO	State CA	Zip Code 92121	Transaction ID : SB17.5081	
Purpose of Disbursement POSTAGE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2611.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 6060 CORNERSTONE COURT, W		Amount of Each Disbursement this Period 98.07
City SAN DIEGO	State CA	
Zip Code 92121	Purpose of Disbursement POSTAGE	Transaction ID : SB17.5080
Candidate Name	001 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) B. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 6060 CORNERSTONE COURT, W		Amount of Each Disbursement this Period 578.92
City SAN DIEGO	State CA	
Zip Code 92121	Purpose of Disbursement POSTAGE	Transaction ID : SB17.5077
Candidate Name	001 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) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 6060 CORNERSTONE COURT, W		Amount of Each Disbursement this Period 747.39
City SAN DIEGO	State CA	
Zip Code 92121	Purpose of Disbursement POSTAGE	Transaction ID : SB17.5075
Candidate Name	001 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:		

SUBTOTAL of Disbursements This Page (optional).....	1424.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE UPS STORE			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 6060 CORNERSTONE COURT, W			Amount of Each Disbursement this Period 391.44	
City SAN DIEGO	State CA	Zip Code 92121	Transaction ID : SB17.5093	
Purpose of Disbursement POSTAGE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. TIME WARNER CABLE			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014	
Mailing Address PO BOX 70872			Amount of Each Disbursement this Period 125.73	
City CHARLOTTE	State NC	Zip Code 28272	Transaction ID : SB17.5050	
Purpose of Disbursement INTERNET SERVICE/TELEPHONE SERVICE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. TIME WARNER CABLE			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014	
Mailing Address PO BOX 70872			Amount of Each Disbursement this Period 124.31	
City CHARLOTTE	State NC	Zip Code 28272	Transaction ID : SB17.5138	
Purpose of Disbursement INTERNET SERVICE/TELEPHONE SERVICE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	641.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TIME WARNER CABLE			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014		
Mailing Address PO BOX 70872			Amount of Each Disbursement this Period 222.31		
City CHARLOTTE	State NC	Zip Code 28272	Transaction ID : SB17.5332		
Purpose of Disbursement INTERNET SERVICE/TELEPHONE SERVICE		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014		
Mailing Address 201 NORTH 3RD STREET			Amount of Each Disbursement this Period 49.00		
City SMITHFIELD	State NC	Zip Code 27577	Transaction ID : SB17.5073		
Purpose of Disbursement POSTAGE		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014		
Mailing Address 201 NORTH 3RD STREET			Amount of Each Disbursement this Period 49.00		
City SMITHFIELD	State NC	Zip Code 27577	Transaction ID : SB17.5321		
Purpose of Disbursement POSTAGE		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	222.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US DEPARTMENT OF THE TREASURY		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1500 PENNSYLVANIA AVENUE, NW		Amount of Each Disbursement this Period 2996.00
City WASHINGTON State DC Zip Code 20220	Purpose of Disbursement TAXES Category/Type 001	
Candidate Name		Transaction ID : SB17.4972
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. US DEPARTMENT OF THE TREASURY		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1500 PENNSYLVANIA AVENUE, NW		Amount of Each Disbursement this Period 2996.00
City WASHINGTON State DC Zip Code 20220	Purpose of Disbursement TAXES Category/Type 001	
Candidate Name		Transaction ID : SB17.5118
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. US DEPARTMENT OF THE TREASURY		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 1500 PENNSYLVANIA AVENUE, NW		Amount of Each Disbursement this Period 2996.00
City WASHINGTON State DC Zip Code 20220	Purpose of Disbursement TAXES Category/Type 001	
Candidate Name		Transaction ID : SB17.5308
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8988.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US HOUSE OF REPRESENTATIVES GIFT SHOP		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1 US CAPITOL LONGWORTH BUILDING		Amount of Each Disbursement this Period 728.75
City WASHINGTON State DC Zip Code 20515	Purpose of Disbursement FUNDRAISING SUPPLIES Category/Type 003	
Candidate Name		Transaction ID : SB17.5055
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US HOUSE OF REPRESENTATIVES GIFT SHOP		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 1 US CAPITOL LONGWORTH BUILDING		Amount of Each Disbursement this Period 245.50
City WASHINGTON State DC Zip Code 20515	Purpose of Disbursement FUNDRAISING SUPPLIES Category/Type 003	
Candidate Name		Transaction ID : SB17.5192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SARAH WATERS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 7265 GUMWOOD LANE		Amount of Each Disbursement this Period 7887.00
City RALEIGH State NC Zip Code 27615	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 003	
Candidate Name		Transaction ID : SB17.5099
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8861.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 166			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SARAH WATERS			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 7265 GUMWOOD LANE			Amount of Each Disbursement this Period 3000.00	
City RALEIGH	State NC	Zip Code 27615	Transaction ID : SB17.5231	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SARAH WATERS			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 7265 GUMWOOD LANE			Amount of Each Disbursement this Period 3000.00	
City RALEIGH	State NC	Zip Code 27615	Transaction ID : SB17.5440	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BOYD WORLEY			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014	
Mailing Address 12067 SWAMP FOX HWY. W			Amount of Each Disbursement this Period 250.00	
City CERRO GORDO	State NC	Zip Code 28430	Transaction ID : SB17.5091	
Purpose of Disbursement IN-KIND: FOOD		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 166			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. METRO MAILING AND PRINTING			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 109 WINONA STREET			Amount of Each Disbursement this Period 891.17 Transaction ID : SB17.4921
City CHARLOTTE	State NC	Zip Code 28203	
Purpose of Disbursement PRINTING		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. OORBEEK MOREHOUSE STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 412 SOUTH CAPITOL STREET, SE SUITE B			Amount of Each Disbursement this Period 15903.92 Transaction ID : SB17.5058
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FUNDRAISING CONSULTING / REIMBURSEMENT: TRAVEL		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. THE PROSPER GROUP CORPORATION			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 435 EAST MAIN STREET SUITE 250			Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4923
City GREENWOOD	State IN	Zip Code 46143	
Purpose of Disbursement WEBSITE SERVICES		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	26795.09
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 161 OF 166	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SARAH WATERS			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 7265 GUMWOOD LANE			Amount of Each Disbursement this Period 3000.00	
City RALEIGH	State NC	Zip Code 27615	Transaction ID : SB17.4924	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

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

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

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	213905.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 166	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROBERT A. JEFFREYS		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2026 HIGHWAY 70 WEST		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.5668
City State Zip Code GOLDSBORO NC 27530	Purpose of Disbursement PARTIAL REFUND OF 9/2/2014 CONTRIBUTION	
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 1578.00 Transaction ID : SB20A.5046
City State Zip Code BENSON NC 27504	Purpose of Disbursement REIMBURSEMENT OF 2013 Q3 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D)	
Candidate Name DAVID ROUZER	Category/Type 010	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) C. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB20A.5094
City State Zip Code BENSON NC 27504	Purpose of Disbursement REIMBURSEMENT OF 2013 Q3 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D)	
Candidate Name DAVID ROUZER	Category/Type 010	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

SUBTOTAL of Disbursements This Page (optional).....	3028.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 166			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB20A.5136
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT OF 2013 Q3 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D) Category/Type 010	
Candidate Name DAVID ROUZER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

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

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

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	6028.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 164 OF 166	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COMMUNITIES IN SCHOOLS OF BRUNSWICK COUNTY		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 10087		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.5554
City SOUTHPORT State NC Zip Code 28461	Purpose of Disbursement DONATION 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NC DENTAL HEALTH FUND		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 1600 EVANS ROAD		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.5369
City CARY State NC Zip Code 27513	Purpose of Disbursement DONATION 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PHIL BERGER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 115 EAST BRENTWOOD ROAD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.5049
City GREENSBORO State NC Zip Code 27403	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name PHILIP BERGER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: NC District: 06		

SUBTOTAL of Disbursements This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	1750.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
METRO MAILING AND PRINTING

Mailing Address 109 WINONA STREET

City State Zip Code
 CHARLOTTE NC 28203

Nature of Debt (Purpose):
 PRINTING

Outstanding Balance Beginning This Period	Transaction ID : SD10.23	
891.17		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	891.17	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE PROSPER GROUP CORPORATION

Mailing Address 435 EAST MAIN STREET
 SUITE 250

City State Zip Code
 GREENWOOD IN 46143

Nature of Debt (Purpose):
 WEBSITE SERVICES

Outstanding Balance Beginning This Period	Transaction ID : SD10.25	
10000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	10000.00	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SARAH WATERS

Mailing Address 7265 GUMWOOD LANE

City State Zip Code
 RALEIGH NC 27615

Nature of Debt (Purpose):
 FUNDRAISING CONSULTING

Outstanding Balance Beginning This Period	Transaction ID : SD10.26	
3000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3000.00	0.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor OORBEEK MOREHOUSE STRATEGIES, LLC		Nature of Debt (Purpose): FUNDRAISING CONSULTING/REIMBURSEMENT TRAVEL
Mailing Address 412 SOUTH CAPITOL STREET, SE SUITE B		
City State	Zip Code	
WASHINGTON	DC 20003	

Outstanding Balance Beginning This Period	Transaction ID : SD10.27	
<input type="text" value="15903.92"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="15903.92"/>	<input type="text" value="0.00"/>

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

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

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