

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Walker 4 NC

ADDRESS (number and street)

PO Box 99247

Check if different than previously reported. (ACC)

Raleigh

NC

27624

2. FEC IDENTIFICATION NUMBER ▼

C C00543231

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NC

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Collin McMichael

Signature of Treasurer Collin McMichael

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Walker 4 NC

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))....	162991.43	417070.46
(b) Total Contribution Refunds (from Line 20(d))	200.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	162791.43	416870.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	88627.89	244043.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	5274.35	8277.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	83353.54	235766.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	249596.44	
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

Walker 4 NC

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).....	97301.00	213286.57
(ii) Unitemized.....	6940.43	13282.43
(iii) TOTAL of contributions from individuals ▶	104241.43	226569.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	58750.00	190501.46
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	162991.43	417070.46
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	5274.35	8277.15
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	168265.78	425347.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88627.89	244043.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	200.00
21. OTHER DISBURSEMENTS	-62.00	7213.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	88765.89	251456.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	170096.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	168265.78
25. SUBTOTAL (add Line 23 and Line 24).....	338362.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88765.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	249596.44

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

Form/Schedule: F3N

Transaction ID :

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Lisa Jo Adornetto		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015	
Mailing Address 3861 Battleground Ave		Transaction ID : SA11AI.11271	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Dentist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 250.00	

Full Name (Last, First, Middle Initial) B. Ray Alexander		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015	
Mailing Address 4607 Jefferson Wood Court		Transaction ID : SA11AI.11128	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Allen Tate	Occupation Real Estate Broker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 250.00	

Full Name (Last, First, Middle Initial) C. Ray Alexander		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015	
Mailing Address 4607 Jefferson Wood Court		Transaction ID : SA11AI.11264	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Allen Tate	Occupation Real Estate Broker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 500.00	

SUBTOTAL of Receipts This Page (optional).....	_____ 750.00
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 7 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Sally Alexander

Mailing Address 4607 Jefferson Wood Court

City Greensboro State NC Zip Code 27410

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11126

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Maryann Allred

Mailing Address 6 Granville Oaks Court

City Greensboro State NC Zip Code 27408

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

Name of Employer Precept Construction, LLC Occupation General Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.11074

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Scott Allred

Mailing Address 6 Granville Oaks Court

City Greensboro State NC Zip Code 27408

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

Name of Employer Precept Construction, LLC Occupation General Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.11075

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 8 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Susan Alt

Mailing Address 512 Otteray Avenue

City High Point State NC Zip Code 27262

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

Name of Employer Volvo Group Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11AI.11121

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Ramon Arias

Mailing Address 4 Deerwood Court

City Greensboro State NC Zip Code 27410

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

Name of Employer Fintly Solutions Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : SA11AI.11208

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
George L Bachmann

Mailing Address 815 Northern Shores Point

City Greensboro State NC Zip Code 27455

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

Name of Employer Self-Employed Occupation Banking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11192

Amount of Each Receipt this Period
 525.00

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

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

3475.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Marion Wilbert Bagwell

Mailing Address 5104 Forest Oaks Drive

City Greensboro State NC Zip Code 27406

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

Name of Employer Self-Employed Occupation Real Estate Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11235

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BJ Barnes

Mailing Address 2709 Pleasant Ridge Road

City Summerfiled State NC Zip Code 27358

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

Name of Employer Guilford County Occupation Sheriff

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11AI.10943

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
David L Belk

Mailing Address 1 Baywater Ln

City Greensboro State NC Zip Code 27406-3123

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

Name of Employer Belk Financial Group Occupation Certified Financial Planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11268

Amount of Each Receipt this Period
300.00

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

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

560.00

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

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

FOR LINE NUMBER: PAGE 10 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Timothy R Bevis

Mailing Address 8394 Cedar Ridge Farm Ct

City State Zip Code
Summerfield NC 27358

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

Name of Employer Occupation
Piedmont Eye Surgical & Laser Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11279

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Cynthia Bissette

Mailing Address 3092 Terramar Dr

City State Zip Code
Naples FL 34119

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

Name of Employer Occupation
Self-Employed Property Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11278

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Mark Bissette

Mailing Address 56 Creswell Ct

City State Zip Code
Greensboro NC 27407

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

Name of Employer Occupation
Lorillard Tobacco Co VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11118

Amount of Each Receipt this Period
100.00

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

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

3800.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Donald J Brady

Mailing Address **PO Box 13587**

City **Greensboro** State **NC** Zip Code **27415**

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

Name of Employer **Brady Trane Services** Occupation **Chairman**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 06 / 2015

Transaction ID : SA11AI.11133

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alan Branson

Mailing Address **3731 Old Julian Road**

City **Julian** State **NC** Zip Code **27283**

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

Name of Employer **Stout Trucking, Inc.** Occupation **Executive**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 02 / 2015

Transaction ID : SA11AI.11119

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Frances T Brown

Mailing Address **5803 Scotland Rd**

City **Greensboro** State **NC** Zip Code **27407**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.11115

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 12 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Frances T Brown

Mailing Address 5803 Scotland Rd

City Greensboro State NC Zip Code 27407

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.11657

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
J Wayne Brown

Mailing Address 5803 Scotland Road

City Greensboro State NC Zip Code 27407

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

Name of Employer Wayneworks Occupation Small Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11114

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Tara M Burgio-Wheelihan

Mailing Address 7303 Hepatica Ln

City Summerfield State NC Zip Code 27358

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

Name of Employer Advanced Technology Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.11085

Amount of Each Receipt this Period
2100.00
 Reattributed From M Wheelihan

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

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

2375.00

**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 13 OF 105

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Roy Carroll

Mailing Address **PO Box 9846**

City **Greensboro** State **NC** Zip Code **27429**

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

Name of Employer **The Carroll Companies** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) **9**

Election Cycle-to-Date
2700.00

Date of Receipt
10 / 15 / 2015

Transaction ID : SA11AI.11052

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Roy Carroll

Mailing Address **PO Box 9846**

City **Greensboro** State **NC** Zip Code **27429**

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

Name of Employer **The Carroll Companies** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
10 / 15 / 2015

Transaction ID : SA11AI.11054

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Flora C Carter

Mailing Address **5006 Heathridge Terrace**

City **Greensboro** State **NC** Zip Code **27410-8418**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
11 / 23 / 2015

Transaction ID : SA11AI.11283

Amount of Each Receipt this Period
500.00

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

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

5900.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Judy S Carter		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2015
Mailing Address 3312 Doral Court		Transaction ID : SA11AI.11094
City Burlington	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 260.00	

Full Name (Last, First, Middle Initial) B. Steven J Carter		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2015
Mailing Address 3312 Doral Ct		Transaction ID : SA11AI.11093
City Burlington	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Karolyn J Chapman		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015
Mailing Address 5084 Riverchase Ridge		Transaction ID : SA11AI.11234
City Winston Salem	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 15 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Jon Christensen

Mailing Address 508 Excalibur Court

City State Zip Code
Franklin TN 37067

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : SA11AI.11200

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Donald N Clark

Mailing Address 6 Elm Ridge Lane

City State Zip Code
Greensboro NC 27408

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

Name of Employer Occupation
Lorillard Tobacco Director, IT Infrastructure

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1175.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11245

Amount of Each Receipt this Period
675.00

C. Full Name (Last, First, Middle Initial)
Lori Cobb

Mailing Address 4925 Chestnut Hill Lane

City State Zip Code
Winston Salem NC 27106

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

Name of Employer Occupation
Calvary Baptist Day School Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11187

Amount of Each Receipt this Period
500.00

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

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

1675.00

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

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

FOR LINE NUMBER: PAGE 16 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Susan Connors

Mailing Address 6495 Winnington Court

City Greensboro State NC Zip Code 27410

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

Name of Employer Information Requested Occupation Information Requested
Libby Hill Seafood Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11224

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Justin C Conrad

Mailing Address 1717 Hobbs Rd

City Greensboro State NC Zip Code 27410

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

Name of Employer Information Requested Occupation Information Requested
Libby Hill Seafood Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11105

Amount of Each Receipt this Period
 750.00

C. Full Name (Last, First, Middle Initial)
Judy J Copple

Mailing Address 639 Plainfield Rd

City Greensboro State NC Zip Code 27455-8235

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

Name of Employer Information Requested Occupation Information Requested
Westover Apartments, Inc. Secretary

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.11653

Amount of Each Receipt this Period
 100.00

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 17 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
David F Couch

Mailing Address 5826 Samet Drive Ste 105

City High Point	State NC	Zip Code 27265-8186
--------------------	-------------	------------------------

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

Name of Employer Blue Ridge Companies	Occupation CEO
------------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11184

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Clay M Custer

Mailing Address 301 Montebello Drive

City Greenville	State SC	Zip Code 29609
--------------------	-------------	-------------------

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

Name of Employer Womble Carlyle	Occupation Attorney
------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.11097

Amount of Each Receipt this Period
1700.00

C. Full Name (Last, First, Middle Initial)
Clay M Custer

Mailing Address 301 Montebello Drive

City Greenville	State SC	Zip Code 29609
--------------------	-------------	-------------------

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

Name of Employer Womble Carlyle	Occupation Attorney
------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.11099

Amount of Each Receipt this Period
1000.00

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

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

5400.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 1018 Wellington Street

City High Point State NC Zip Code 27262

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11111

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
William Neal Davis

Mailing Address 505 W Cornwallis Dr

City Greensboro State NC Zip Code 27408

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

Name of Employer Shift, Inc. Occupation CMO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11246

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Dwight Donald Dawson

Mailing Address 1760 Foxhall Ln

City Mebane State NC Zip Code 27302

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

Name of Employer Guilford County Occupation Networking and Telecommunications Mana

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11285

Amount of Each Receipt this Period
 200.00

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 19 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Michael Dehaan

Mailing Address **7767 Pearman Quarry Road**

City **Kernersville** State **NC** Zip Code **27284**

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

Name of Employer **Qorvo** Occupation **General Manager**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : SA11AI.11255

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Louis DeJoy

Mailing Address **806 Country Club Dr**

City **Greensboro** State **NC** Zip Code **27408**

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

Name of Employer **Logistics Supply Chain, Inc.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.11102

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Louis DeJoy

Mailing Address **806 Country Club Dr**

City **Greensboro** State **NC** Zip Code **27408**

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

Name of Employer **Logistics Supply Chain, Inc.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.11103

Amount of Each Receipt this Period
 2700.00

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

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

5650.00

**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 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Dr. Christopher Dickson

Mailing Address 818 Bass Landing Pl

City Greensboro State NC Zip Code 27455

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

Name of Employer Cone Helath Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : SA11AI.11059

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Barry Z Dodson

Mailing Address 201 S Market St

City Madison State NC Zip Code 27025

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

Name of Employer Self-Employed Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11231

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
John F Donnelly Jr.

Mailing Address 476 Summit Avenue

City Statesville State NC Zip Code 28677

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

Name of Employer Retired Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11142

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: PAGE 21 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Van T Duncan

Mailing Address 403 Cross Vine Ln

City Greensboro State NC Zip Code 27455

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

Name of Employer Burlington Aviation Occupation Flight Instructor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11338

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Daniel Forsberg

Mailing Address 2122 Enterprise Rd

City Greensboro State NC Zip Code 27408

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11AI.11088

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address 2 Hillwind Ct

City Greensboro State NC Zip Code 27408

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : SA11AI.11086

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 22 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address 2 Hillwind Ct

City Greensboro State NC Zip Code 27408

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.11090

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address 2 Hillwind Ct

City Greensboro State NC Zip Code 27408

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : SA11AI.11199

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address 2 Hillwind Ct

City Greensboro State NC Zip Code 27408

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.11562

Amount of Each Receipt this Period
25.00

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

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

75.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Brenda Frizzel

Mailing Address 802 Kemp Road W

City Greensboro State NC Zip Code 27410

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

Name of Employer Dr. Howard Holderness Occupation Registered Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11108

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jeff Fryer

Mailing Address 3404 Shaker Drive

City Greensboro State NC Zip Code 27410

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

Name of Employer AT&T Occupation Communication/Electron Equipment

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11194

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sam Funchess

Mailing Address 6811 Poplar Grove Trail

City Greensboro State NC Zip Code 27410

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

Name of Employer Nussbaum Center Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11238

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: PAGE 24 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Jack D Garman Jr.

Mailing Address 1405 Loch Lomond Drive

City State Zip Code
Summerfield NC 27358

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

Name of Employer Occupation
Syngenta Key Account Lead

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.11211

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sam Geduldig

Mailing Address 1101 K Street NW
STE 650

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Clark, Geduldig, Cranford Nels Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11158

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Joseph Giaritelli

Mailing Address 124 Beverly Pl

City State Zip Code
Greensboro NC 27403

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

Name of Employer Occupation
Lawndale Baptist Church Senior Pastor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
520.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11232

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 25 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Lori Greeson

Mailing Address 9 Claridge Court

City Greensboro State NC Zip Code 27407

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11250

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Bret S Grieves

Mailing Address 2928 Round Hill Rd

City Greensboro State NC Zip Code 27408

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

Name of Employer Scott Insurance Occupation Rist Management & Insurance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.11565

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Lee Guthrie

Mailing Address 7 Orchard Grass Ct

City Greensboro State NC Zip Code 27410

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

Name of Employer Guilford County Sheriff's Offi Occupation Deputy Sheriff

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11AI.11055

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: PAGE 26 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Lynn M Guthrie

Mailing Address 7 Orchard Grass Ct

City Greensboro State NC Zip Code 27410

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11AI.11056

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Donald R Haase

Mailing Address 12295 SE 132nd Terrace

City Ocklawaha State FL Zip Code 32179

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11171

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Brenda R Hair

Mailing Address 187 Deertrack Loop

City Stoneville State NC Zip Code 27048-8419

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

Name of Employer Volvo GM Trucks Occupation Computer Programmer Annalist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **552.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11141

Amount of Each Receipt this Period
500.00

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: PAGE 27 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Pamela Foster Hanzaker

Mailing Address 5016 Casting Way

City Greensboro State NC Zip Code 27455

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **644.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.11100

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lori Harris

Mailing Address 3424 Kilcash Drive

City Clemmons State NC Zip Code 27012

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

Name of Employer Calvary Baptist Church Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : SA11AI.11269

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
William J Hawkins

Mailing Address 1870 Paw Paw Rd

City Stoneville State NC Zip Code 27048

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

Name of Employer DaySpring Farm Occupation Public Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : SA11AI.11174

Amount of Each Receipt this Period
25.00

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

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

1025.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
David Charles Hayes

Mailing Address 6395 Burnt Poplar Road

City Greensboro State NC Zip Code 27409

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

Name of Employer Western Carolina Forklift Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11109

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joe Hill

Mailing Address 3508 Vernon St

City Greensboro State NC Zip Code 27408-2920

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.11092

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Linda B Hill

Mailing Address 3508 Vernon St

City Greensboro State NC Zip Code 27408-2920

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.11659

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 29 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Linda B Hill

Mailing Address 3508 Vernon St

City Greensboro State NC Zip Code 27408-2920

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11296

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Fay Bowman Hoggard

Mailing Address 3307 Waldron Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer Information Requested Occupation Information Requested
Self-Employed Property Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11134

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mary Lou Holoman

Mailing Address 7323 Strawberry Rd

City Summerfield State NC Zip Code 27358

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

Name of Employer Information Requested Occupation Information Requested
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
574.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11144

Amount of Each Receipt this Period
500.00

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

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

1010.00

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

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

FOR LINE NUMBER: PAGE 30 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Nancy Howard

Mailing Address 1520 Burnetts Chapel Road

City Greensboro State NC Zip Code 27407

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11258

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Alex Jarvis

Mailing Address 1306 Claiborne House Court

City McLean State VA Zip Code 22101

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

Name of Employer Fierce Occupation Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : SA11AI.11050

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Gregory A Johns

Mailing Address 7450 Strader Rd

City Summerfield State NC Zip Code 27358

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

Name of Employer Self-Employed Occupation Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : SA11AI.11202

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: PAGE 31 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Patricia I Johnson

Mailing Address 3934 Spanish Oak Hill Road

City State Zip Code
Snow Camp NC 27349

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11335

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gerald Jones

Mailing Address 373 West Lake Trail

City State Zip Code
Mebane NC 27302

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11306

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Kimberly A Jones

Mailing Address 5704 Snow Hill Dr

City State Zip Code
Summerfield NC 27358

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.11091

Amount of Each Receipt this Period
250.00

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

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

760.00

**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 32 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Bradford Koury

Mailing Address **PO Box 850**

City **Burlington** State **NC** Zip Code **27216**

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

Name of Employer **Carolina Hosiery** Occupation **Executive**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 23 / 2015

Transaction ID : SA11AI.11229

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
David M Kuratnick

Mailing Address **1812 Nottingham Rd**

City **Greensboro** State **NC** Zip Code **27408**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11AI.10892

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
David M Kuratnick

Mailing Address **1812 Nottingham Rd**

City **Greensboro** State **NC** Zip Code **27408**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11AI.10894

Amount of Each Receipt this Period
800.00

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 33 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
David M Kuratnick

Mailing Address 1812 Nottingham Rd

City Greensboro State NC Zip Code 27408

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11333

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Sarah G Kuratnick

Mailing Address 1812 Nottingham Road

City Greensboro State NC Zip Code 27408

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11334

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Todd Leonard

Mailing Address 3025 Pleasant Ridge Road

City Summerfield State NC Zip Code 27358

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

Name of Employer TDMS Properties Occupation Property Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11280

Amount of Each Receipt this Period
500.00

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 34 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Walter Lewis

Mailing Address 6143 Lake Brandt Rd

City Greensboro State NC Zip Code 27455

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11AI.11089

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 520.00

B. Full Name (Last, First, Middle Initial)
J Thomas Lindley Sr

Mailing Address 2510 Pineway Dr

City Burlington State NC Zip Code 27215

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11140

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 275.00

C. Full Name (Last, First, Middle Initial)
W Clarke Lindley

Mailing Address PO Box 341

City Burlington State NC Zip Code 27216

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

Name of Employer Lindley Laboratories Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11139

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 275.00

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: PAGE 35 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Walker 4 NC

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

Mailing Address 933 Oakwood Ave

City Lake Forest State IL Zip Code 60045

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11332

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City Browns Summit State NC Zip Code 27214

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11AI.10935

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City Browns Summit State NC Zip Code 27214

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11226

Amount of Each Receipt this Period
100.00

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

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

310.00

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

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

FOR LINE NUMBER: PAGE 36 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City State Zip Code
Browns Summit NC 27214

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11242

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City State Zip Code
Browns Summit NC 27214

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1306.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.11654

Amount of Each Receipt this Period
106.00

C. Full Name (Last, First, Middle Initial)
Cynthia Mann

Mailing Address 545 Hilton Road

City State Zip Code
Stokesdale NC 27357

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

Name of Employer Occupation
SilkRoad Technology, Inc. Administrative Professional

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11320

Amount of Each Receipt this Period
50.00

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

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

356.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Matthew T Martens

Mailing Address 501 Tapawingo Road SW

City State Zip Code
Vienna VA 22180

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

Name of Employer Occupation
WilmerHale Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11149

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Daniel James Mattoon

Mailing Address 6344 Cavalier Corridor

City State Zip Code
Falls Church VA 22044

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

Name of Employer Occupation
Mattoon & Associates President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11AI.10890

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Darrell W McCall

Mailing Address PO Box 69

City State Zip Code
Jamestown NC 27282

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11AI.11545

Amount of Each Receipt this Period
250.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 38 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Robert A. J. McGrady

Mailing Address 100 Pineburr Rd

City Greensboro State NC Zip Code 27455-1700

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11272

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 550.00

B. Full Name (Last, First, Middle Initial)
Bruce F McGuirk

Mailing Address 6002 Armfield Ct

City Summerfield State NC Zip Code 27358

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

Name of Employer John Hancock Brokerage Occupation Regional Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2015

Transaction ID : SA11AI.11073

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Carmen McGuirk

Mailing Address 6002 Armfield Court

City Summerfield State NC Zip Code 27358

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

Name of Employer Guilford County School Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2015

Transaction ID : SA11AI.11071

Amount of Each Receipt this Period
 250.00

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 39 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Carol M McKinney

Mailing Address 3501 Brown Bark Dr

City Greensboro State NC Zip Code 27410

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

Name of Employer Lawndale Baptist Church Occupation Admin Assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11243

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Edwin S Melvin

Mailing Address 106 Willoughby Blvd

City Greensboro State NC Zip Code 27408

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

Name of Employer Joseph Bryan Foundation Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : SA11AI.11077

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Richard Nester

Mailing Address 5807 Stanley Huff Rd

City Summer Field State NC Zip Code 27358

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

Name of Employer Tri-City Mechanical Contractor Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : SA11AI.11079

Amount of Each Receipt this Period
2700.00

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

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

3950.00

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

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

FOR LINE NUMBER: PAGE 40 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
John Nosek

Mailing Address 4012 Hazel Lane

City Greensboro State NC Zip Code 27408

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

Name of Employer Greensboro Orthopaedics Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : SA11AI.11205

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Robin J Parker

Mailing Address 5908 Founders Dr

City Greensboro State NC Zip Code 27410

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

Name of Employer Apple, Koceja & Assoc., CPAs Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11AI.10922

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Benjamin Parnell

Mailing Address 220 Woodlyn Dr

City Reidsville State NC Zip Code 27320

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.11196

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 41 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Zach Paulsen

Mailing Address 711 Chalfonte Drive

City Alexandria State VA Zip Code 22305

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

Name of Employer Akin Gump Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11AI.11095

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Larry W Pearman

Mailing Address 4810 Carlson Valley Rd

City Summerfield State NC Zip Code 27358

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11237

Amount of Each Receipt this Period
 700.00

C. Full Name (Last, First, Middle Initial)
Glenn H Person Jr

Mailing Address 5876 Stanley Huff Road

City Summerfield State NC Zip Code 27358

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

Name of Employer Raymond James Occupation Stock Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11227

Amount of Each Receipt this Period
 700.00

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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 42 OF 105

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Nancy Pickard
 Mailing Address 909 Sunset Drive
 City Greensboro State NC Zip Code 27408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015
Transaction ID : SA11AI.11197
 Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Kevin B Powell
 Mailing Address 5573 Brookberry Farm Rd
 City Winston Salem State NC Zip Code 27106-8763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Foothill Ford Occupation Owner
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 02 / 2015
Transaction ID : SA11AI.11123
 Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Kevin B Powell
 Mailing Address 5573 Brookberry Farm Rd
 City Winston Salem State NC Zip Code 27106-8763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Foothill Ford Occupation Owner
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 02 / 2015
Transaction ID : SA11AI.11124
 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 43 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Samuel Powell

Mailing Address **PO Box 2104**

City **Burlington** State **NC** Zip Code **27216**

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

Name of Employer **Powell Enterprises** Occupation **Executive**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : SA11AI.11207

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Deborah H Ratliff

Mailing Address **90 Heron's Bill Dr**

City **Bluffton** State **SC** Zip Code **29909**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : SA11AI.11070

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
John Ratliff

Mailing Address **90 Heron's Bill Drive**

City **Bluffton** State **SC** Zip Code **29909**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : SA11AI.11068

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 44 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
John W Robinson

Mailing Address 3704 Windspray Ct

City Summerfield State NC Zip Code 27358

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.11339

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
George Ed Sears

Mailing Address 2701 Winslow Ln

City Winston Salem State NC Zip Code 27103-5736

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

Name of Employer Grace Baptist Temple Occupation Minister

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11251

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
George Ed Sears

Mailing Address 2701 Winslow Ln

City Winston Salem State NC Zip Code 27103-5736

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

Name of Employer Grace Baptist Temple Occupation Minister

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **660.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11294

Amount of Each Receipt this Period
60.00

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

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

1060.00

**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 45 OF 105

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Jerianne Severson

Mailing Address 6409 Peppermill Drive

City State Zip Code
 Oak Ridge NC 27310

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

Name of Employer Occupation
 Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : SA11AI.11078

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jonathan D Shepherd

Mailing Address 8107 Rogers Ct

City State Zip Code
 Greensboro NC 27455

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

Name of Employer Occupation
 AT&T Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11AI.11125

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ernestine M Smith

Mailing Address 5707 Silver Sky Way

City State Zip Code
 Greensboro NC 27416

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

Name of Employer Occupation
 Lawdale Baptist Church Receptionist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11323

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 46 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Thomas E Smith Jr
 Mailing Address 1003 Northern Shores Lane
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tradition Homes Occupation President
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : SA11AI.11274
 Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Micah Spencer
 Mailing Address 6315 Nesting Way
 City Oak Ridge State NC Zip Code 27310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Student Occupation Studen
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015
Transaction ID : SA11AI.11172
 Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Pat S Stephenson
 Mailing Address PO Box 527
 City Mebane State NC Zip Code 27302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : SA11AI.11215
 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 47 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Christian Streck

Mailing Address 4 Staunton Ct

City Greensboro State NC Zip Code 27410

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

Name of Employer Cone Health Occupation Administration

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.11043

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Leigh Fitchett Sudbrink

Mailing Address 402 Monmouth Dr

City Greensboro State NC Zip Code 27410-6051

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11AI.11087

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
James Tasios

Mailing Address 4540 Chinaberry Lane

City Winston Salem State NC Zip Code 27106

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

Name of Employer American Premium Beverage Occupation Key Accounts & Product Development

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11214

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 48 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Scott M Thomas

Mailing Address 612 Wedgedale Ave

City Greensboro State NC Zip Code 27403-1087

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

Name of Employer Scott Private Wealth Group Occupation Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11261

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Danny L Thompson

Mailing Address 6074 Windsor Farme Rd

City Summerfield State NC Zip Code 27358

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

Name of Employer Comfort Keepers Occupation Home Health Care Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11219

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Eric P Thomsson

Mailing Address 4 Seabrook Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Brookside Veneers Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11AI.10895

Amount of Each Receipt this Period
2700.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 49 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Eric P Thomsson

Mailing Address 4 Seabrook Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Brookside Veneers Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11277

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Meredith Tingen

Mailing Address 3106 Horsepen Creek Road

City Greensboro State NC Zip Code 27410

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11AI.11063

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Meredith Tingen

Mailing Address 3106 Horsepen Creek Road

City Greensboro State NC Zip Code 27410

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.11313

Amount of Each Receipt this Period
20.00

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

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

520.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Michael Tingen

Mailing Address 8400 Crichton Court

City State Zip Code
Oak Ridge NC 27310

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

Name of Employer Occupation
WOW Pizza Server

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11AI.11061

Amount of Each Receipt this Period
250.00

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

Mailing Address 994 Lashley Road

City State Zip Code
Greensboro NC 27455

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

Name of Employer Occupation
Bell Partners Real Estate Admin Assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11260

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Matthew K Tsuei

Mailing Address 18 Winterberry Ct

City State Zip Code
Greensboro NC 27455

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

Name of Employer Occupation
Central Carolina Surgery Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11AI.11057

Amount of Each Receipt this Period
700.00

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: PAGE 51 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Matthew K Tsuei
 Mailing Address 18 Winterberry Ct
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Carolina Surgery Occupation Surgeon
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 12 / 2015
Transaction ID : SA11AI.11058
 Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Mitchell T Vakerics
 Mailing Address 4221 36th Street S
 City Arlington State VA Zip Code 22206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ovation Occupations Occupation Project Manager
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015
Transaction ID : SA11AI.11330
 Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Raymond Ted Vanhoy III
 Mailing Address 5698 Green Dale Ct
 City Summerfield State NC Zip Code 27358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RF Micro Devices Occupation Engineer
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2015
Transaction ID : SA11AI.10914
 Amount of Each Receipt this Period
500.00

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

3450.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Raymond Ted Vanhoy III

Mailing Address 5698 Green Dale Ct

City Summerfield State NC Zip Code 27358

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

Name of Employer RF Micro Devices Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11173

Amount of Each Receipt this Period
2050.00

B. Full Name (Last, First, Middle Initial)
Raymond Ted Vanhoy III

Mailing Address 5698 Green Dale Ct

City Summerfield State NC Zip Code 27358

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

Name of Employer RF Micro Devices Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11175

Amount of Each Receipt this Period
650.00

C. Full Name (Last, First, Middle Initial)
Jerry W Walker

Mailing Address 8308 McCrory Rd

City Stokesdale State NC Zip Code 27357

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

Name of Employer Oak Level Baptist Church Occupation Pastor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11252

Amount of Each Receipt this Period
250.00

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

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

2950.00

**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 53 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Kenneth J Walker

Mailing Address 135 Peppertree Drive

City State Zip Code
Mebane NC 27302

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

Name of Employer Occupation
ReMax Diamond Realty Real Estate Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11179

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Christopher Wall

Mailing Address 3435 South Wakefield Street

City State Zip Code
Arlington VA 22206

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

Name of Employer Occupation
The Policy Group Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.11154

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Don Webb

Mailing Address 2209 Timberlake Drive

City State Zip Code
High Point NC 27265

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

Name of Employer Occupation
Wells Fargo Advisors Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11257

Amount of Each Receipt this Period
250.00

In-kind -

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: PAGE 54 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Millicent West

Mailing Address 124 Ridgeway Ln

City Lexington State NC Zip Code 27295

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

Name of Employer Occupation
Forsythe Neurological Medical Assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11220

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mark Wheelihan

Mailing Address 7303 Hepatica Lane

City Summerfield State NC Zip Code 27358

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

Name of Employer Occupation
Harley Davidson of Greensboro Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 05 / 2015

Transaction ID : SA11AI.10572

Amount of Each Receipt this Period
 2100.00

RARD Requested - Letter Sent 8/5/2015

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mark Wheelihan

Mailing Address 7303 Hepatica Lane

City Summerfield State NC Zip Code 27358

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

Name of Employer Occupation
Harley Davidson of Greensboro Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.11084

Amount of Each Receipt this Period
 -2100.00

Reattributed To T Burgid-Wheelihan

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: PAGE 55 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Jacqueline Taylor Wieland

Mailing Address 5010 Warm Spring Point

City Grensboro State NC Zip Code 27455

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

Name of Employer Stifel Occupation First Vice President - Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11106

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
Jacqueline Taylor Wieland

Mailing Address 5010 Warm Spring Point

City Grensboro State NC Zip Code 27455

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

Name of Employer Stifel Occupation First Vice President - Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.11107

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Kevin T Williford

Mailing Address 309 Saint Lauren Drive

City Greensboro State NC Zip Code 27410

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

Name of Employer Williford Insurance Group, Inc Occupation Insurance Broker/Health Insurance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.11253

Amount of Each Receipt this Period
 250.00

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

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

5650.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Howard O Woltz III

Mailing Address 1373 Boggs Dr

City State Zip Code
Mt Air NC 27030

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

Name of Employer Occupation
InSteel Industries, Inc. President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11AI.11098

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Susan Woods

Mailing Address 7706 E Pepper Ct

City State Zip Code
Oak Ridge NC 27310

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.11130

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Aldona A Wos MD

Mailing Address 806 Country Club Drive

City State Zip Code
Greensboro NC 27408

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 06 / 2015

Transaction ID : SA11AI.11136

Amount of Each Receipt this Period
2700.00

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

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

5900.00

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Aldona A Wos MD

Mailing Address 806 Country Club Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.11138

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Benjamin C Zuraw

Mailing Address 313 Sunset Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.11189

Amount of Each Receipt this Period
250.00

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).....

2950.00

97301.00

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

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

FOR LINE NUMBER: PAGE 58 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (AKA AGSH&F CIVIC ACTION COMMITTEE)

A. Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11C.11341

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 CONSTITUTION AVE NW
SUITE 400W

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11C.10886

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11C.11169

Amount of Each Receipt this Period
 2500.00

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

4250.00

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 59 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11C.11166

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00129932

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11C.11547

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11C.11554

Amount of Each Receipt this Period
 2500.00

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: PAGE 60 OF 105

(check only one)

<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
------------------------------------	-------------------------------------	------------------------------------------------	------------------------------------	-----------------------------

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
CORNING INCORPORATED EMPLOYEES POLITICAL ACTION COMMITTEE (COREPAC)

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : SA11C.11161

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address **550 SOUTH TRYON STREET**

City **CHARLOTTE** State **NC** Zip Code **28202**

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11C.11563

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
ELECT - THE PAC OF THE ALABAMA FARMERS FEDERATION

Mailing Address **P. O. BOX 11000**

City **MONTGOMERY** State **AL** Zip Code **36191**

FEC ID number of contributing federal political committee. **C C00094573**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11573

Amount of Each Receipt this Period
1000.00

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 61 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City State Zip Code
INDIANAPOLIS IN 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11C.11041

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE

Mailing Address PO BOX 2485

City State Zip Code
SPRINGFIELD VA 22152

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11C.11555

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FMR LLC POLITICAL ACTION COMMITTEE STATE-FEDERAL (FIDELITY PAC)

Mailing Address 245 SUMMER STREET

City State Zip Code
BOSTON MA 02210

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11C.11343

Amount of Each Receipt this Period
1000.00

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: PAGE 62 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JASON CHAFFETZ

Mailing Address **315 WESTFIELD CIRCLE**

City **ALPINE** State **UT** Zip Code **84004**

FEC ID number of contributing federal political committee. **C C00431684**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11C.11549

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GARY PALMER FOR CONGRESS

Mailing Address **1919 OXMOOR RD #235**

City **HOMEWOOD** State **AL** Zip Code **35209**

FEC ID number of contributing federal political committee. **C C00551374**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11571

Amount of Each Receipt this Period
2500.00

\$500 Refunded on 1/22/2016

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address **555 12TH STREET, NW
SUITE 660**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11570

Amount of Each Receipt this Period
2500.00

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 63 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
ITG HOLDINGS U.S.A. INC. POLITICAL ACTION COMMITTEE (AKA ITG PAC)

Mailing Address **714 GREEN VALLEY ROAD**

City **GREENSBORO** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C C00587543**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 06 / 2015

Transaction ID : SA11C.11145

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
LINCOLN FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **116 EAST BERRY STREET
PO BOX 960**

City **FORT WAYNE** State **NE** Zip Code **46801**

FEC ID number of contributing federal political committee. **C C00167486**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11568

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address **228 S WASHINGTON ST STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00540187**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11C.10883

Amount of Each Receipt this Period
2500.00

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 64 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES ROAD
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268

FEC ID number of contributing federal political committee. **C C00170258**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11C.11340

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11581

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11C.10887

Amount of Each Receipt this Period
2500.00

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: PAGE 65 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address **11250 WAPLES MILL ROAD**

City **FAIRFAX** State **VA** Zip Code **22030**

FEC ID number of contributing federal political committee. **C C00053553**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : SA11C.11164

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION COMMITTEE (NSSF PAC)

Mailing Address **400 N. CAPITOL STREET NW
SUITE 490**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00480863**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11C.10884

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
PIONEER POLITICAL ACTION COMMITTEE

Mailing Address **900 FORT STREET MALL**

City **HONOLULU** State **HI** Zip Code **96813**

FEC ID number of contributing federal political committee. **C C00325357**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11C.10881

Amount of Each Receipt this Period
 5000.00

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: PAGE 66 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address **P. O. BOX 718**

City State Zip Code
WINSTON-SALEM NC 27102

FEC ID number of contributing federal political committee. **C C00042002**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 23 2015

Transaction ID : SA11C.11284

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address **P. O. BOX 718**

City State Zip Code
WINSTON-SALEM NC 27102

FEC ID number of contributing federal political committee. **C C00042002**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11C.11647

Amount of Each Receipt this Period
2500.00

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

Mailing Address **PO BOX 573**

City State Zip Code
EDWARDSVILLE IL 62025

FEC ID number of contributing federal political committee. **C C00573493**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 21 2015

Transaction ID : SA11C.11552

Amount of Each Receipt this Period
1000.00

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

6000.00

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 67 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address **PO BOX 23219**

City **JEFFERSON** State **LA** Zip Code **70183**

FEC ID number of contributing federal political committee. **C C00394957**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11C.11548

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SYNGENTA PAC)

Mailing Address **1775 PENNSYLVANIA AVENUE NW SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00363945**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11648

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
TE CONNECTIVITY, INC. POLITICAL ACTION COMMITTEE TELPAC

Mailing Address **607 14TH STREET NW STE. 250**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00433482**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.11566

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: (check only one)	PAGE 68 OF 105
	<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	

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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11C.11560

Amount of Each Receipt this Period
2500.00

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 M / D 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 M / D 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).....

2500.00

58750.00

**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 69 OF 105
	<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	

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)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. NationBuilder		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2015	
Mailing Address 520 S. Grand Ave. 2nd floor		Transaction ID : SA14.11621	
City Los Angeles	State CA	Zip Code 90071	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 722.00	
Name of Employer Occupation		Vendor Refund	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 722.00	

Full Name (Last, First, Middle Initial) B. Sheraton Hotel		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2015	
Mailing Address 3121 Gate City Blvd		Transaction ID : SA14.11488	
City Greensboro	State NC	Zip Code 27407	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3095.78	
Name of Employer Occupation		Vendor Refund	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3095.78	

Full Name (Last, First, Middle Initial) C. TCS Event Rentals		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2015	
Mailing Address PO Box 1957		Transaction ID : SA14.11487	
City Burlington	State NC	Zip Code 27216	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1363.74	
Name of Employer Occupation		Vendor Refund	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1363.74	

SUBTOTAL of Receipts This Page (optional).....	5181.52
TOTAL This Period (last page this line number only).....	5181.52

**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 70 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 632.20
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Airfare	Transaction ID : SB17.11588
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. Ashby Law PLLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 717 Princess Street		Amount of Each Disbursement this Period 3712.50
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Legal Services	Transaction ID : SB17.11379
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) c. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 32.35
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.11351
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:		

SUBTOTAL of Disbursements This Page (optional).....	4377.05
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 71 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 36.40
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.11423
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. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 35.05
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.11586
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) c. Battleground Family		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 836 W. Lexington Avenue		Amount of Each Disbursement this Period 38.70
City High Point	State NC	
Zip Code 27262	Purpose of Disbursement Fuel	Transaction ID : SB17.11365
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:		

SUBTOTAL of Disbursements This Page (optional).....	110.15
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 72 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Battleground Family			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 836 W. Lexington Avenue			Amount of Each Disbursement this Period 22.00
City High Point	State NC	Zip Code 27262	
Purpose of Disbursement Fuel		Category/ Type	Transaction ID : SB17.11375
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. Battleground Family			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 836 W. Lexington Avenue			Amount of Each Disbursement this Period 31.60
City High Point	State NC	Zip Code 27262	
Purpose of Disbursement Fuel, Food / Beverage		Category/ Type	Transaction ID : SB17.11600
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. BB&T			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 201 West Market Street			Amount of Each Disbursement this Period 4.00
City Greensboro	State NC	Zip Code 27401	
Purpose of Disbursement Bank Service Fees		Category/ Type	Transaction ID : SB17.11393
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).....	57.60
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 73 OF 105		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 201 West Market Street		Amount of Each Disbursement this Period 5.75
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Bank Service Fee	
Candidate Name	Category/Type	Transaction ID : SB17.11520
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. BB&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 201 West Market Street		Amount of Each Disbursement this Period 21.60
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Bank Service Fee	
Candidate Name	Category/Type	Transaction ID : SB17.11619
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. Shea Bryant		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 1119 Rogers Road		Amount of Each Disbursement this Period 2000.00
City Graham State NC Zip Code 27253	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	Transaction ID : SB17.11361
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).....	2027.35
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 74 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Shea Bryant		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 1119 Rogers Road		Amount of Each Disbursement this Period 2000.00
City Graham	State NC	
Zip Code 27253	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.11372
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. Shea Bryant		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 2941 Battleground Avenue #38334		Amount of Each Disbursement this Period 4643.00
City Greensboro	State NC	
Zip Code 27438	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.11610
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) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 235.77
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.11373
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:		

SUBTOTAL of Disbursements This Page (optional).....	6878.77
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 75 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 360.08 Transaction ID : SB17.11374
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food/Beverage	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 307.12 Transaction ID : SB17.11506
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food/Beverage	Category/ Type
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:	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 243.65 Transaction ID : SB17.11507
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food/Beverage	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	910.85
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 76 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 300 First St SE			Amount of Each Disbursement this Period 100.44 Transaction ID : SB17.11613
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement 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) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 300 First St SE			Amount of Each Disbursement this Period 145.57 Transaction ID : SB17.11614
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement 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. CM&Co, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 97275			Amount of Each Disbursement this Period 3060.60 Transaction ID : SB17.11381
City Raleigh	State NC	Zip Code 27624	
Purpose of Disbursement Accounting Services		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).....	3306.61
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 77 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. CM&Co, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 3992.45 Transaction ID : SB17.11511
City Raleigh State NC Zip Code 27624	Category/Type	
Purpose of Disbursement Accounting Services	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. Delta Air Lines Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 379.20 Transaction ID : SB17.11407
City Atlanta State GA Zip Code 30320	Category/Type	
Purpose of Disbursement Airfare	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. Delta Air Lines Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 379.20 Transaction ID : SB17.11409
City Atlanta State GA Zip Code 30320	Category/Type	
Purpose of Disbursement Airfare	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).....	4750.85
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 78 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. DHARMA MERCHANT SERVICES			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address P.O. BOX 246			Amount of Each Disbursement this Period 80.67 Transaction ID : SB17.11350
City ALPHARETTA	State GA	Zip Code 30009	
Purpose of Disbursement Merchant Fees		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. DHARMA MERCHANT SERVICES			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address P.O. BOX 246			Amount of Each Disbursement this Period 870.25 Transaction ID : SB17.11419
City ALPHARETTA	State GA	Zip Code 30009	
Purpose of Disbursement Merchant Fees		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) C. DHARMA MERCHANT SERVICES			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address P.O. BOX 246			Amount of Each Disbursement this Period 501.37 Transaction ID : SB17.11587
City ALPHARETTA	State GA	Zip Code 30009	
Purpose of Disbursement Merchant Fees		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:	

SUBTOTAL of Disbursements This Page (optional).....	1452.29
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 79 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.11347
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
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. Facebook		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 158.16 Transaction ID : SB17.11414
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
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) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 5.10 Transaction ID : SB17.11415
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
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:		

SUBTOTAL of Disbursements This Page (optional).....	223.26
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 80 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 25.04
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : SB17.11417
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. Facebook		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 45.30
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : SB17.11582
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) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 19.86
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : SB17.11583
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:		

SUBTOTAL of Disbursements This Page (optional).....	90.20
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 81 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Family Service of Greensboro Foundation			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 902 Bonner Dr			Amount of Each Disbursement this Period 54.00 Transaction ID : SB17.11662
City Jamestown	State NC	Zip Code 27282	
Purpose of Disbursement Disgorgement of Anonymous Contribution		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. Genuity Concepts Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 29321			Amount of Each Disbursement this Period 2074.45 Transaction ID : SB17.11526
City Greensboro	State NC	Zip Code 27429	
Purpose of Disbursement Challenge Coins		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. Google			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1600 Amphitheatre Pkwy			Amount of Each Disbursement this Period 73.66 Transaction ID : SB17.11355
City Mountain View	State CA	Zip Code 94043	
Purpose of Disbursement Online Services		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).....	2202.11
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 82 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 75.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Online Services	Transaction ID : SB17.11420
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. Google		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 75.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Online Services	Transaction ID : SB17.11589
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) c. Phil R Graham		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3980 Bittle Rd		Amount of Each Disbursement this Period 596.00
City Gibsonville	State NC	
Zip Code 27249	Purpose of Disbursement Site Fee, Security	Transaction ID : SB17.11385
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:		

SUBTOTAL of Disbursements This Page (optional).....	746.00
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 83 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Calvary Baptist Church		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 5585 Burlington Road		Amount of Each Disbursement this Period 500.00
City McLeansville State NC Zip Code 27301	Purpose of Disbursement Site Fee	Transaction ID : SB17.11385.0
Candidate Name	Category/Type	[MEMO ITEM]
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. Hampton Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 9670 Baltimore Ave		Amount of Each Disbursement this Period 262.12
City College Park State MD Zip Code 20740	Purpose of Disbursement Lodging	Transaction ID : SB17.11432
Candidate Name	Category/Type	
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. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 3357 Battleground Ave		Amount of Each Disbursement this Period 22.21
City Greensboro State NC Zip Code 27410	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.11489
Candidate Name	Category/Type	
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).....	284.33
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 84 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1102 Longworth Hob		Amount of Each Disbursement this Period 614.45 Transaction ID : SB17.11591
City Washington State DC Zip Code 20515	Purpose of Disbursement Host Gifts	
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. IT Works		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 1724-101 Battleground Ave		Amount of Each Disbursement this Period 1717.49 Transaction ID : SB17.11359
City Greensboro State NC Zip Code 27408	Purpose of Disbursement IT Services	
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) C. Jon Eric Johnson Photography		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 634 Oak Leak Road Apt E		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11490
City Asheboro State NC Zip Code 27205	Purpose of Disbursement Photography Services	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2831.94
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 85 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Lucky 32		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 1421 Westover Terrace		Amount of Each Disbursement this Period 40.00
City Greensboro	State NC	Transaction ID : SB17.11368
Zip Code 27408	Purpose of Disbursement Food/Beverage	
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. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 520 S. Grand Ave. 2nd floor		Amount of Each Disbursement this Period 92.00
City Los Angeles	State CA	Transaction ID : SB17.11387
Zip Code 90071	Purpose of Disbursement Software	
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) c. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 520 S. Grand Ave		Amount of Each Disbursement this Period 70.54
City Los Angeles	State CA	Transaction ID : SB17.11515
Zip Code 90071	Purpose of Disbursement Software	
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:		

SUBTOTAL of Disbursements This Page (optional).....	202.54
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 86 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 520 S. Grand Ave. 2nd floor		Amount of Each Disbursement this Period 722.00 Transaction ID : SB17.11617
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Software	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. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 520 S. Grand Ave. 2nd floor		Amount of Each Disbursement this Period 722.00 Transaction ID : SB17.11637
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Software	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. NC State Board of Elections		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address PO Box 27255		Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.11593
City Raleigh	State NC	
Zip Code 27611-7255	Purpose of Disbursement Filing Fee	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).....	3184.00
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 87 OF 105		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 91.02
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11354
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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 20.23
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11394
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) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 28.42
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11395
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:		

SUBTOTAL of Disbursements This Page (optional).....	139.67
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 88 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 272.15 Transaction ID : SB17.11426
City Greensboro	State NC Zip Code 27403	
Purpose of Disbursement Office Supplies	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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 175.93 Transaction ID : SB17.11492
City Greensboro	State NC Zip Code 27403	
Purpose of Disbursement Office Supplies	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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 327.46 Transaction ID : SB17.11497
City Greensboro	State NC Zip Code 27403	
Purpose of Disbursement Office Supplies	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).....	775.54
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 89 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 156.22
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11498
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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 52.47
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11500
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) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 23.29
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11501
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:		

SUBTOTAL of Disbursements This Page (optional).....	231.98
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 90 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 61.69
City Greensboro State NC Zip Code 27403	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : SB17.11504
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 12 / 10 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 36.27
City Greensboro State NC Zip Code 27403	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : SB17.11603
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 12 / 11 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 38.88
City Greensboro State NC Zip Code 27403	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : SB17.11605
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).....	136.84
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 91 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 3018 High Point Rd		Amount of Each Disbursement this Period 315.98 Transaction ID : SB17.11640
City Greensboro	State NC Zip Code 27403	
Purpose of Disbursement Office Supplies	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. One Source Document Solutions		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 311-D Pomona Dr		Amount of Each Disbursement this Period 591.55 Transaction ID : SB17.11384
City Greensbro	State NC Zip Code 27407	
Purpose of Disbursement Printing/Mailing Services	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. One Source Document Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 311-D Pomona Dr		Amount of Each Disbursement this Period 141.11 Transaction ID : SB17.11512
City Greensbro	State NC Zip Code 27407	
Purpose of Disbursement Printing/Mailing Services	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).....	1048.64
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 92 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Red Stampede		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 6701 Fairview Rd		Amount of Each Disbursement this Period 420.63 Transaction ID : SB17.11358
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Merchant Fees	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. Red Stampede		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 6701 Fairview Rd		Amount of Each Disbursement this Period 1602.00 Transaction ID : SB17.11422
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Merchant Fees	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. Red Stampede		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 6701 Fairview Rd		Amount of Each Disbursement this Period 1010.75 Transaction ID : SB17.11505
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Merchant Fees	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).....	3033.38
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 93 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Red Stampede		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 6701 Fairview Rd		Amount of Each Disbursement this Period 353.63 Transaction ID : SB17.11594
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Merchant Fees	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. Addison Riddleberger		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 4017 Westmount Dr		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.11399
City Greensboro	State NC	
Zip Code 27410	Purpose of Disbursement Field Representative	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. Addison Riddleberger		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 4017 Westmount Dr		Amount of Each Disbursement this Period 72.92 Transaction ID : SB17.11509
City Greensboro	State NC	
Zip Code 27410	Purpose of Disbursement Mileage	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).....	626.55
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 94 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Rio Grande		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 122 E Meadow Rd # 5		Amount of Each Disbursement this Period 65.00
City Eden	State NC	
Zip Code 27288	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.11418
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. Rio Grande		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 122 E Meadow Rd # 5		Amount of Each Disbursement this Period 56.00
City Eden	State NC	
Zip Code 27288	Purpose of Disbursement Food / Beverage	Transaction ID : SB17.11607
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) c. Danielle Rosson		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 5018 Marigold Way		Amount of Each Disbursement this Period 1500.00
City Greenboro	State NC	
Zip Code 27410	Purpose of Disbursement Field Representative	Transaction ID : SB17.11609
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:		

SUBTOTAL of Disbursements This Page (optional).....	1621.00
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 95 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 5700 6th Ave		Amount of Each Disbursement this Period 100.00
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Fuel	Transaction ID : SB17.11388
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. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 5700 6th Ave		Amount of Each Disbursement this Period 32.00
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Fuel	Transaction ID : SB17.11516
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) c. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 5700 6th Ave		Amount of Each Disbursement this Period 20.44
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Fuel	Transaction ID : SB17.11611
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:		

SUBTOTAL of Disbursements This Page (optional).....	152.44
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 96 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 5700 6th Ave		Amount of Each Disbursement this Period 32.50 Transaction ID : SB17.11629
City Altoona State PA Zip Code 16602	Purpose of Disbursement Fuel	
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. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address P.O. Box 2463		Amount of Each Disbursement this Period 37.65 Transaction ID : SB17.11397
City Houston State TX Zip Code 77252	Purpose of Disbursement Fuel	
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) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address P.O. Box 2463		Amount of Each Disbursement this Period 37.00 Transaction ID : SB17.11495
City Houston State TX Zip Code 77252	Purpose of Disbursement Fuel	
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:		

SUBTOTAL of Disbursements This Page (optional).....	107.15
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 97 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address P.O. Box 2463		Amount of Each Disbursement this Period 15.85
City Houston State TX Zip Code 77252	Purpose of Disbursement Fuel	
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)	Transaction ID : SB17.11525
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address P.O. Box 2463		Amount of Each Disbursement this Period 18.70
City Houston State TX Zip Code 77252	Purpose of Disbursement Fuel	
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)	Transaction ID : SB17.11638
State: District:		

Full Name (Last, First, Middle Initial) c. Sheraton Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 3121 Gate City Blvd		Amount of Each Disbursement this Period 25000.00
City Greensboro State NC Zip Code 27407	Purpose of Disbursement Site Fee, Catering, Lodging	
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)	Transaction ID : SB17.11427
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25034.55
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 98 OF 105		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Sheraton Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3121 Gate City Blvd		Amount of Each Disbursement this Period 10.36
City Greensboro State NC Zip Code 27407	Category/Type	
Purpose of Disbursement Lodging		Transaction ID : SB17.11499
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. Signature Events		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 272		Amount of Each Disbursement this Period 348.00
City Julian State NC Zip Code 27283	Category/Type	
Purpose of Disbursement Event Rentals - Catering Supplies		Transaction ID : SB17.11348
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. Sirius XM		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1221 Avenue of the Americas		Amount of Each Disbursement this Period 24.32
City New York City State NY Zip Code 10020	Category/Type	
Purpose of Disbursement Car Services		Transaction ID : SB17.11590
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).....	382.68
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 99 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Snap Publications		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address PO Box 9846		Amount of Each Disbursement this Period 1350.00 Transaction ID : SB17.11396
City Greensboro State NC Zip Code 27429	Purpose of Disbursement Advertising	
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. Stamey's Barbeque		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 2812 Battleground Avenue		Amount of Each Disbursement this Period 2825.44 Transaction ID : SB17.11352
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Food/Beverage	
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) C. Sunset Creations		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 2203 Patterson Street		Amount of Each Disbursement this Period 271.92 Transaction ID : SB17.11513
City Greensboro State NC Zip Code 27407	Purpose of Disbursement Logo Advertising Gifts	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4447.36
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 100 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. The Cannon Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 1001 Pennsylvania Avenue NW Suite 1300 N			Amount of Each Disbursement this Period 4618.46 Transaction ID : SB17.11386
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Fundraising Consulting	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. The Cannon Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1001 Pennsylvania Avenue NW Suite 1300 N			Amount of Each Disbursement this Period 4140.45 Transaction ID : SB17.11424
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Fundraising Consulting	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) c. The Cannon Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1001 Pennsylvania Avenue NW Suite 1300 N			Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.11595
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Fundraising Consulting	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:			

SUBTOTAL of Disbursements This Page (optional).....	11758.91
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 101 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. The Marshall Freehouse		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 1211 Battleground Avenue		Amount of Each Disbursement this Period 380.00 Transaction ID : SB17.11377
City Greensboro	State NC	
Zip Code 27408	Purpose of Disbursement 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) B. The Marshall Freehouse		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 1211 Battleground Avenue		Amount of Each Disbursement this Period 21.74 Transaction ID : SB17.11601
City Greensboro	State NC	
Zip Code 27408	Purpose of Disbursement 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. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 4642 W Market St		Amount of Each Disbursement this Period 29.62 Transaction ID : SB17.11626
City Greensboro	State NC	
Zip Code 27407	Purpose of Disbursement Shipping	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).....	431.36
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 102 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 2941 Battleground Ave		Amount of Each Disbursement this Period 54.80
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Postage	
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)	Transaction ID : SB17.11615
State: District:		

Full Name (Last, First, Middle Initial) B. Van's Advertising		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 3290 Van Dr		Amount of Each Disbursement this Period 2684.76
City Burlington State NC Zip Code 27215	Purpose of Disbursement Advertising	
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)	Transaction ID : SB17.11360
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 140 West Street		Amount of Each Disbursement this Period 206.13
City New York State NY Zip Code 10007	Purpose of Disbursement Phone Services	
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)	Transaction ID : SB17.11604
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2945.69
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 103 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 228.68
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone Services	Transaction ID : SB17.11494
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. Village Tavern		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 1903 Westridge Rd		Amount of Each Disbursement this Period 89.00
City Greensboro	State NC	
Zip Code 27408	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.11376
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) 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	
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:		

SUBTOTAL of Disbursements This Page (optional).....	317.68
TOTAL This Period (last page this line number only).....	86827.32

**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 104 OF 105			
	<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				

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)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Fran Rafanovic		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 1589 Skeet Club Rd Ste 102 #243		Amount of Each Disbursement this Period -250.00 Transaction ID : SB20A.11645
City High Point	State NC	
Zip Code 27265	Purpose of Disbursement VOIDED STALE DATED CHECK FROM 8/11/14	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. Fran Rafanovic		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 1589 Skeet Club Rd Ste 102 #243		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.11646
City High Point	State NC	
Zip Code 27265	Purpose of Disbursement REISSUED CHECK FROM 8/11/14	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).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**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 105 OF 105	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. GREATER GREENSBORO REPUBLICAN WOMENS CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 231-A SOUTH ELM STREET			Amount of Each Disbursement this Period 28.00 Transaction ID : SB21.11598
City GREENSBORO	State NC	Zip Code 27401	
Purpose of Disbursement Non-Federal Contribution		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. Riddell for House			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 6343 Beale Road			Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.11670
City Snow Camp	State NC	Zip Code 27349	
Purpose of Disbursement Non-Federal Contribution		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. Rockingham County Republican Party			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address PO Box 1282			Amount of Each Disbursement this Period -340.00 Transaction ID : SB21.11644
City Reidsville	State NC	Zip Code 27323-1282	
Purpose of Disbursement Voided Stale Dated Check from 3/25/14		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).....	-62.00
TOTAL This Period (last page this line number only).....	-62.00