

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
15 OCT 20 AM 10:49
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Thom Tillis Committee

ADDRESS (number and street)

PO Box 97396

Check if different than previously reported. (ACC)

Raleigh

NC

27624

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00545772

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NC

00

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 Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

in the State of

M M / D D / Y Y Y Y Y Y

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

in the State of

M M / D D / Y Y Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

through

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

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

Date

M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

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)

201510200200289194

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Thom Tillis Committee

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2015

To:

MM / DD / YYYY
09 / 30 / 2015

	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)) ...	85032.70	891104.24
(b) Total Contribution Refunds (from Line 20(d)) ..	3500.00	47881.16
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	81532.70	843223.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	101653.90	1400148.71
(b) Total Offsets to Operating Expenditures (from Line 14)...	1500.00	38088.76
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	100153.90	1362059.95
8. Cash on Hand at Close of Reporting Period (from Line 27)...	147050.78	
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) ...	344808.23	

For further information contact:

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

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

201510200200289195

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 55

Write or Type Committee Name

Thom Tillis Committee

Report Covering the Period: From: M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2015 To: M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2015

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)...

35523.54

203948.54

(ii) Unitemized.....

259.16

7302.59

(iii) TOTAL of contributions
from individuals . ▶

35782.70

211251.13

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

49250.00

679853.11

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

85032.70

891104.24

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES ..

3008.07

37855.28

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.) ..

1500.00

38088.76

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)...

89540.77

967048.28

201510200200289196

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	101653.90	1400148.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	250000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	250000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	1500.00	39881.16
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	2000.00	8000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	3500.00	47881.16
21. OTHER DISBURSEMENTS ...	0.00	2150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	105153.90	1700179.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	162663.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	89540.77
25. SUBTOTAL (add Line 23 and Line 24) ...	252204.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	105153.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	147050.78

201510200200289197

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)
Thom Tillis Committee

Full Name (Last, First, Middle Initial) MR. FRANCIS ATKINSON		Date of Receipt MM / DD / YYYY 09 / 26 / 2015
Mailing Address 12421 NORTH OAKS DRIVE		Transaction ID : SA11.40345
City ASHLAND State VA Zip Code 23005-7841	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer MCGUIRE WOODS, LLP Occupation ATTORNEY	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONTRIBUTION
Election Cycle-to-Date 1000.00		DEBT RETIREMENT

Full Name (Last, First, Middle Initial) MR. THOMAS F. BEDDOW		Date of Receipt MM / DD / YYYY 09 / 28 / 2015
Mailing Address 19 EDINBURGH LANE		Transaction ID : SA11.40349
City PINEHURST State NC Zip Code 28374-6714	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED Occupation RETIRED	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONTRIBUTION
Election Cycle-to-Date 3600.00		DEBT RETIREMENT, RA/RD LETTER SENT 9/28/15

Full Name (Last, First, Middle Initial) DR. L. DANIELLE BERKOWITZ		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 223 FAIRMONT ROAD		Transaction ID : SA11.40433
City SHELBY State NC Zip Code 28150-8215	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00
Name of Employer CAROLINA CHIROPRACTIC Occupation CHIROPRACTOR	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONTRIBUTION
Election Cycle-to-Date 2600.00		DEBT RETIREMENT

SUBTOTAL of Receipts This Page (optional).....	4600.00
TOTAL This Period (last page this line number only).....	

201510200200289198

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 55			
	(check only one)			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
DR. RICHARD H. BERKOWITZ

Mailing Address **223 FAIRMONT ROAD**

City SHELBY	State NC	Zip Code 28150-8215
-----------------------	--------------------	-------------------------------

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

Name of Employer CAROLINA CHIROPRACTIC	Occupation CHIROPRACTOR
--	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

MM	DD	YYYY
09	30	2015

Transaction ID : SA11.40432

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **35 MCMICHAEL DRIVE**

City PINEHURST	State NC	Zip Code 28374-6702
--------------------------	--------------------	-------------------------------

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

Name of Employer SELF-EMPLOYED	Occupation OWNER/OPERATOR ATMS
--	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2319.64

Date of Receipt

MM	DD	YYYY
09	10	2015

Transaction ID : SA11.40335

Amount of Each Receipt this Period

500.00

CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MRS. LYDIA BOESCH

Mailing Address **35 MCMICHAEL DR**

City PINEHURST	State NC	Zip Code 28374-6702
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
--	-------------------------------

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
09	10	2015

Transaction ID : SA11.40334

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

3600.00

201510200200289199

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

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

FOR LINE NUMBER: PAGE 7 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. JAMES A. CANDELMO

Mailing Address **414 WAYFIELD LANE**

City **CARY** State **NC** Zip Code **27518-6371**

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

Name of Employer **ALLY FINANCIAL** Occupation **COMPLIANCE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 31 / 2015**
Transaction ID : **SA11.40330**

Amount of Each Receipt this Period **100.00**
CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. WALLACE CHEVES

Mailing Address **5040 CECIL AVENUE**

City **GREENVILLE** State **SC** Zip Code **29601-**

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

Name of Employer **SKY BOAT GAMING** Occupation **PRINCIPAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **09 / 30 / 2015**
Transaction ID : **SA11.40425**

Amount of Each Receipt this Period **2600.00**
CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **ONE JAMES CENTER**

City **RICHMOND** State **VA** Zip Code **23219-4089**

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

Name of Employer **MCGUIREWOODS** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 28 / 2015**
Transaction ID : **SA11.40351**

Amount of Each Receipt this Period **1000.00**
CONTRIBUTION

DEBT RETIREMENT

SUBTOTAL of Receipts This Page (optional) **3700.00**

TOTAL This Period (last page this line number only)

201510200200289200

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. JASON J. DEANS

Mailing Address **613 W. CABARRUS STREET**
APT 202

City **RALEIGH** State **NC** Zip Code **27603-2169**

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

Name of Employer **JASON DEANS & ASSOCIATES** Occupation **PUBLIC RELATIONS CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 10 / 2015

Transaction ID : **SA11.40337**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. H. BENSON DENDY III

Mailing Address **1142 WEST AVENUE**

City **RICHMOND** State **VA** Zip Code **23220-3720**

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

Name of Employer **THE VECTRE CORPORATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1298.54**

Date of Receipt
09 / 21 / 2015

Transaction ID : **SA11.40346**

Amount of Each Receipt this Period
1298.54

CONTRIBUTION

IN-KIND - EVENT FOOD/BEVERAGE, DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. THOMAS DIXON DICKENS

Mailing Address **1348 LONGLEAF DRIVE**

City **FAYETTEVILLE** State **NC** Zip Code **28305-5207**

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

Name of Employer **VALLEY MOTORS INC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40428**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

DEBT RETIREMENT

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

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

2798.54

201510200200289201

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

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

FOR LINE NUMBER: PAGE 9 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. SAL DISCIASCIO

Mailing Address **698 PRESCOTT ROAD**

City **NEW BERN** State **NC** Zip Code **28560-5913**

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

Name of Employer **DISABLED** Occupation **DISABLED AMERICAN VETERAN**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
07 / 09 / 2015

Transaction ID : **SA11.40317**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAL DISCIASCIO

Mailing Address **698 PRESCOTT ROAD**

City **NEW BERN** State **NC** Zip Code **28560-5913**

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

Name of Employer **DISABLED** Occupation **DISABLED AMERICAN VETERAN**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
08 / 10 / 2015

Transaction ID : **SA11.40326**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAL DISCIASCIO

Mailing Address **698 PRESCOTT ROAD**

City **NEW BERN** State **NC** Zip Code **28560-5913**

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

Name of Employer **DISABLED** Occupation **DISABLED AMERICAN VETERAN**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
09 / 09 / 2015

Transaction ID : **SA11.40336**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

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

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

75.00

201510200200289202

**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 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. GEORGE C. FREEMAN III

Mailing Address **29 TWIN LAKES LANE**

City RICHMOND	State VA	Zip Code 23229-8039
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FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSAL LEAF TOBACCO CO. INC.	Occupation CHAIRMAN/PRESIDENT/CFO
--	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2015

Transaction ID : **SA11.40343**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. GOODWIN JR.

Mailing Address **ONE JAMES CENTER
901 EAST CARY STREET, SUITE 1500**

City RICHMOND	State VA	Zip Code 23219-4089
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2015

Transaction ID : **SA11.40331**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GREGG L. HARTLEY

Mailing Address **857 CEDAR DRIVE**

City DEALE	State MD	Zip Code 20751-9613
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FEC ID number of contributing federal political committee. **C**

Name of Employer CLOCKROOM ADVISORS	Occupation PRINCIPAL
---	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2015

Transaction ID : **SA11.40315**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

DEBT RETIREMENT

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

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

4000.00

201510200200289203

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

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

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NAME OF COMMITTEE (in Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MS. SUSAN HIRSCHMANN

Mailing Address **4052 SEMINARY ROAD**

City ALEXANDRIA	State VA	Zip Code 22304-1646
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FEC ID number of contributing federal political committee.

Name of Employer WILLIAMS & JENSON	Occupation PRINCIPAL
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
07 / 10 / 2015

Transaction ID : **SA11.40314**

Amount of Each Receipt this Period

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. EDWIN C. HOLBROOK

Mailing Address **201 TROON PLACE**

City SHELBY	State NC	Zip Code 28150-4875
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FEC ID number of contributing federal political committee.

Name of Employer CLEVELAND COMMUNITY COLLEGE	Occupation DEVELOPMENT FUNDRAISING
--	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA11.40430**

Amount of Each Receipt this Period

CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. BENNE C. HUTSON

Mailing Address **2624 BERETANIA CIRCLE**

City CHARLOTTE	State NC	Zip Code 28211-3636
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FEC ID number of contributing federal political committee.

Name of Employer MCGUIRE WOODS LLP	Occupation ATTORNEY
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
09 / 10 / 2015

Transaction ID : **SA11.40338**

Amount of Each Receipt this Period

CONTRIBUTION

DEBT RETIREMENT

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

201510200200289204

**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)

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

PAGE 12 OF 55

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. JAMES E. HYLAND

Mailing Address **1101 PENNSYLVANIA AVENUE NW**

City **WASHINGTON** State **DC** Zip Code **20004-2504**

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

Name of Employer **PENNSYLVANIA AVENUE GROUP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **08 / 03 / 2015**

Transaction ID : **SA11.40324**

Amount of Each Receipt this Period **1500.00**

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. HARRISON J. KAPLAN

Mailing Address **2304 SWEET BIRCH COURT**

City **RALEIGH** State **NC** Zip Code **27613-8533**

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

Name of Employer **MCGUIRE WOODS LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 10 / 2015**

Transaction ID : **SA11.40339**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. PAUL D. KOONCE

Mailing Address **4112 OXFORD ROAD**

City **RICHMOND** State **VA** Zip Code **23221-3226**

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

Name of Employer **DOMINION RESOURCE SERVICES, INC.** Occupation **CEO - ENERGY INFRASTRUCTURE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 24 / 2015**

Transaction ID : **SA11.40327**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

DEBT RETIREMENT

SUBTOTAL of Receipts This Page (optional)..... **3500.00**

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

201510200200289205

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

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

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

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

Mailing Address **500 WILLOW BEND LN**

City **FAYETTEVILLE** State **NC** Zip Code **28303-5901**

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

Name of Employer **REED LALLIER CHEVROLET** Occupation **OWNER**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40427**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STUART H. LEGRAND

Mailing Address **PO BOX 727**

City **SHELBY** State **NC** Zip Code **28151-0727**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40431**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **100 HIDDEN STREAM DR**

City **APEX** State **NC** Zip Code **27539-7758**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
07 / 23 / 2015

Transaction ID : **SA11.40362**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

DEBT RETIREMENT REFUNDED \$500.00 ON 08/04/2015

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

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

2500.00

201510200200289206

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

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

FOR LINE NUMBER: PAGE 14 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MS. CAROLYN E. MCDONNELL

Mailing Address 1193 STARR WAY

City VIRGINIA BEACH State VA Zip Code 23454-3054

FEC ID number of contributing federal political committee.

Name of Employer MILITARY PRODUCE GROUP Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /
Transaction ID : SA11.40329

Amount of Each Receipt this Period
 CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. ROBERT CHRISTOPHER MCKINLEY

Mailing Address 110 DOGWOOD DRIVE

City MEBANE State NC Zip Code 27302-9611

FEC ID number of contributing federal political committee.

Name of Employer GREEN CAP FINANCIAL Occupation CONSUMER FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /
Transaction ID : SA11.40350

Amount of Each Receipt this Period
 CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. PATRICK M. MEACHAM

Mailing Address 1929 PARTRIDGE BERRY DRIVE

City RALEIGH State NC Zip Code 27606-9695

FEC ID number of contributing federal political committee.

Name of Employer MCGUIRE WOODS LLP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /
Transaction ID : SA11.40340

Amount of Each Receipt this Period
 CONTRIBUTION

DEBT RETIREMENT

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

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

201510200200289207

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

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

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. RANDOLPH N. REYNOLDS

Mailing Address **8605 RIVER ROAD**

City **RICHMOND** State **VA** Zip Code **23229-8301**

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

Name of Employer **REYNOLDS DEVELOPMENT, LLC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2015

Transaction ID : **SA11.40328**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA B. ROSE

Mailing Address **119 DOGWOOD LANE**

City **SHELBY** State **NC** Zip Code **28150-8404**

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

Name of Employer **LEASING SERVICES, INC.** Occupation **TREASURER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40426**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. FRANK A. STEWART

Mailing Address **5218 WOODLAND BAY DRIVE**

City **BELMONT** State **NC** Zip Code **28012-8879**

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

Name of Employer **ULTRA MACHINE ADN PALERATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40429**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

DEBT RETIREMENT

SUBTOTAL of Receipts This Page (optional)..... **4000.00**

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

201510200200289208

**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 55
(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM GRIFFITH THOMAS

Mailing Address **4783 HERRING CREEK ROAD**

City AYLETT	State VA	Zip Code 23009-2112
-----------------------	--------------------	-------------------------------

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

Name of Employer REED SMITH LLP	Occupation ATTORNEY
---	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM	DD	YYYY
09	30	2015

Transaction ID : **SA11.40434**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. RICHARD W. VIOLA

Mailing Address **6418 WOODLEIGH OAKS DRIVE**

City CHARLOTTE	State NC	Zip Code 28226-8534
--------------------------	--------------------	-------------------------------

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

Name of Employer MCGUIREWOODS, LLP	Occupation ATTORNEY
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
09	10	2015

Transaction ID : **SA11.40341**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

DEBT RETIREMENT

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

MM	DD	YYYY
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Amount of Each Receipt this Period

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

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

1500.00
35523.54

201510200200289209

**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 55
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
ACCENTURE INC. POLITICAL ACTION COMMITTEE

Mailing Address **800 CONNECTICUT AVENUE NW
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20006-2716**

FEC ID number of contributing federal political committee. **C C00300707**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40442**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address **101 CONSTITUTION AVE NW
SUITE 400W**

City **WASHINGTON** State **DC** Zip Code **20001-2155**

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40438**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGAT

Mailing Address **222 SOUTH PROSPECT AVE
C/O FINANCE DEPARTMENT**

City **PARK RIDGE** State **IL** Zip Code **60068-4037**

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
09 / 22 / 2015

Transaction ID : **SA11.40344**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4000.00

201510200200289210

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (AB

Mailing Address **1300 MORRIS DRIVE SUITE 100**

City **CHESTERBROOK** State **PA** Zip Code **19087-5559**

FEC ID number of contributing federal political committee. **C C00400929**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 30 / 2015**

Transaction ID : SA11.40437

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL AC

Mailing Address **410 SEVENTEENTH STREET SUITE 2200**

City **DENVER** State **CO** Zip Code **80202-4432**

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 27 / 2015**

Transaction ID : SA11.40320

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CISCO SYSTEMS, INC. FEDERAL PAC, AKA CISCO SYSTEMS EPAC

Mailing Address **400 CAPITOL MALL, STE 1545**

City **SACRAMENTO** State **CA** Zip Code **95814-4434**

FEC ID number of contributing federal political committee. **C C00362707**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **09 / 30 / 2015**

Transaction ID : SA11.40435

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

DEBT RETIREMENT

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

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

4500.00

201510200200289211

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

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

FOR LINE NUMBER: PAGE 19 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGRO
 Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000
 City WASHINGTON State DC Zip Code 20004-2524
 FEC ID number of contributing federal political committee. **C** C00008474
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 MM / DD / YYYY
 09 / 30 / 2015
Transaction ID : SA11.40443
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.
 Mailing Address 975 F STREET, NW SUITE 300
 City WASHINGTON State DC Zip Code 20004-1459
 FEC ID number of contributing federal political committee. **C** C00477653
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 MM / DD / YYYY
 09 / 30 / 2015
Transaction ID : SA11.40436
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION
 DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA PIPER PAC
 Mailing Address 500 8TH STREET, NW
 City WASHINGTON State DC Zip Code 20004-2131
 FEC ID number of contributing federal political committee. **C** C00151340
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify)
 Election Cycle-to-Date 750.00

Date of Receipt
 MM / DD / YYYY
 09 / 30 / 2015
Transaction ID : SA11.40441
 Amount of Each Receipt this Period
 750.00
 CONTRIBUTION

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

7750.00

201510200200289212

**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 55
(check only one)

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

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

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

Mailing Address **550 SOUTH TRYON STREET**

City **CHARLOTTE** State **NC** Zip Code **28202-4200**

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
09 / 28 / 2015

Transaction ID : **SA11.40352**

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

Mailing Address **171 SOUTH STREET**

City **HOPKINTON** State **MA** Zip Code **01748-2208**

FEC ID number of contributing federal political committee. **C C00385948**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40424**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHI)

Mailing Address **300 M STREET S.E. SUITE 350**

City **300 M STREET S.E.** State **DC** Zip Code **20003-3436**

FEC ID number of contributing federal political committee. **C C00325092**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11.40439**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

4500.00

201510200200289213

**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 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION

Mailing Address **1600 DUKE STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314-3466**

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 MM / DD / YYYY
09 / 28 / 2015

Transaction ID : **SA11.40348**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address **1015 FIFTEENTH STREET NW**

City **WASHINGTON** State **DC** Zip Code **20005-2605**

FEC ID number of contributing federal political committee. **C C00034272**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA11.40440**

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PIEDMONT NATURAL GAS PAC

Mailing Address **PO BOX 33068**

City **CHARLOTTE** State **NC** Zip Code **28233-3068**

FEC ID number of contributing federal political committee. **C C00144824**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 MM / DD / YYYY
09 / 04 / 2015

Transaction ID : **SA11.40333**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

9500.00

201510200200289214

**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 55
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
SCANA CORPORATION FEDERAL PAC

Mailing Address 100 SCANA PKWY
ATTN: MARK CANNON-C101

City SCAYCE State SC Zip Code 29033-3712

FEC ID number of contributing federal political committee. **C** C00200907

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2015

Transaction ID : SA11.40322

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SIERRA NEVADA CORPORATION PAC

Mailing Address P.O. BOX 50193

City SPARKS State NV Zip Code 89435-0193

FEC ID number of contributing federal political committee. **C** C00367995

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2015

Transaction ID : SA11.40316

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)

Mailing Address 2001 K STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20006-1040

FEC ID number of contributing federal political committee. **C** C00359075

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2015

Transaction ID : SA11.40347

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

DEBT RETIREMENT

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

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

6000.00

201510200200289215

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

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

FOR LINE NUMBER: PAGE 23 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
SWEDISH MATCH NORTH AMERICA, INC. PAC

Mailing Address **1021 EAST CARY STREET**

City **RICHMOND** State **VA** Zip Code **23219-0020**

FEC ID number of contributing federal political committee. **C C00215053**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt **09 / 24 / 2015**
Transaction ID : SA11.40354

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION
 DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
THE ASCAP LEGISLATIVE FUND FOR THE ARTS

Mailing Address **ONE LINCOLN PLAZA**

City **NEW YORK** State **NY** Zip Code **10023-7129**

FEC ID number of contributing federal political committee. **C C00228296**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 29 / 2015**
Transaction ID : SA11.40353

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address **50 F STREET NW SUITE 900**

City **WASHINGTON** State **DC** Zip Code **20001-1530**

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **08 / 03 / 2015**
Transaction ID : SA11.40325

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **4500.00**

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

201510200200289216

**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 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
THERMO FISHER SCIENTIFIC INC. PAC

Mailing Address **81 WYMAN STREET
PO BOX 9046**

City **WALTHAM** State **MA** Zip Code **02451-1223**

FEC ID number of contributing federal political committee. **C C00292318**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 MM / DD / YYYY
07 / 27 / 2015

Transaction ID : **SA11.40321**

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
UNIVERSAL LEAF TOBACCO COMPANY, INCORPORATED POLITICAL ACTIO

Mailing Address **9201 FOREST HILL AVENUE
STONY POINT II BUILDING**

City **RICHMOND** State **VA** Zip Code **23235-6865**

FEC ID number of contributing federal political committee. **C C00214072**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 MM / DD / YYYY
08 / 31 / 2015

Transaction ID : **SA11.40332**

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
US CHAMBER OF COMMERCE

Mailing Address **1615 H STREET NW**

City **WASHINGTON** State **DC** Zip Code **20062-0001**

FEC ID number of contributing federal political committee. **C C90013145**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 MM / DD / YYYY
08 / 05 / 2015

Transaction ID : **SA11.40323**

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

DEBT RETIREMENT

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

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

8500.00

49250.00

201510200200289217

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

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

FOR LINE NUMBER: PAGE 25 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. TILLIS MAJORITY COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 97275
 City RALEIGH State NC Zip Code 27624-7275
 Date of Receipt 09 / 30 / 2015
 Transaction ID : SA12.40355
 Amount of Each Receipt this Period 418.05
 TRANSFER
 DEBT RETIREMENT TRANSFER OF JOINT FUNDRAISING PROCEEDS
 FEC ID number of contributing federal political committee. C C00572495
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4294.07

B. GARY D. OYSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 189
 City FRANKLINTON State NC Zip Code 27525-0189
 Date of Receipt 09 / 28 / 2015
 Transaction ID : SA12.40356
 Amount of Each Receipt this Period 500.00
 TRANSFER
 [MEMO ITEM]
 JFC ATTRIB: TILLIS MAJORITY COMMITTEE DEBT RETIREMENT
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 OYSTER & TROPMAN DENTIST
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

C. TILLIS MAJORITY COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 97275
 City RALEIGH State NC Zip Code 27624-7275
 Date of Receipt 09 / 30 / 2015
 Transaction ID : SA12.40357
 Amount of Each Receipt this Period 1680.46
 TRANSFER
 TRANSFER OF JOINT FUNDRAISING PROCEEDS
 FEC ID number of contributing federal political committee. C C00572495
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify)
 Election Cycle-to-Date 4512.94

SUBTOTAL of Receipts This Page (optional)..... 2098.51
TOTAL This Period (last page this line number only).....

201510200200289218

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 55
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
MR. FELIX SABATES

Mailing Address **P.O. BOX 729**

City **PINEVILLE** State **NC** Zip Code **28134-0729**

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

Name of Employer **SELF-EMPLOYED** Occupation **CAR DEALER**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA12.40358**

Amount of Each Receipt this Period
2700.00

TRANSFER

[MEMO ITEM]
JFC ATTRIB: TILLIS MAJORITY COMMITTEE

B. Full Name (Last, First, Middle Initial)
TILLIS MAJORITY COMMITTEE

Mailing Address **PO BOX 97275**

City **RALEIGH** State **NC** Zip Code **27624-7275**

FEC ID number of contributing federal political committee. **C C00572495**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2251.26**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA12.40359**

Amount of Each Receipt this Period
909.56

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. Full Name (Last, First, Middle Initial)
MR. FELIX SABATES

Mailing Address **P.O. BOX 729**

City **PINEVILLE** State **NC** Zip Code **28134-0729**

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

Name of Employer **SELF-EMPLOYED** Occupation **CAR DEALER**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA12.40360**

Amount of Each Receipt this Period
2700.00

TRANSFER

[MEMO ITEM]
JFC ATTRIB: TILLIS MAJORITY COMMITTEE

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

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

909.56

3008.07

201510200200289219

**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)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314-3109

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY
07	22	2015

Transaction ID : SA14.2522

Amount of Each Receipt this Period

VENDOR REFUND

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY

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.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY

Amount of Each Receipt this Period

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

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

201510200200289220

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. MR. H. BENSON DENDY III

Full Name (Last, First, Middle Initial)
Mailing Address 1142 WEST AVENUE

City RICHMOND State VA Zip Code 23220-3720

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 21 / 2015

Amount of Each Disbursement this Period: 1298.54

Transaction ID : SB17.40346

IN-KIND - EVENT FOOD/BEVERAGE, DEBT RETIREMENT

B. JORDAN P SHAW

Full Name (Last, First, Middle Initial)
Mailing Address 827 DANIELS ST

City RALEIGH State NC Zip Code 27605-3105

Purpose of Disbursement MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 06 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2487

C. JORDAN P SHAW

Full Name (Last, First, Middle Initial)
Mailing Address 827 DANIELS ST

City RALEIGH State NC Zip Code 27605-3105

Purpose of Disbursement MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 11 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2500

SUBTOTAL of Disbursements This Page (optional)..... 3298.54

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

201510200200289221

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)
A. JORDAN P SHAW

Mailing Address **827 DANIELS ST**

City **RALEIGH** State **NC** Zip Code **27605-3105**

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 01 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : **SB17.I2504**

Category/Type

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address **PO BOX 619616**

City **DFW AIRPORT** State **TX** Zip Code **75261**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 03 / 2015

Amount of Each Disbursement this Period
519.20

Transaction ID : **SB17.I2505**

Category/Type

Full Name (Last, First, Middle Initial)
C. AMERICAN AIRLINES

Mailing Address **PO BOX 619616**

City **DFW AIRPORT** State **TX** Zip Code **75261**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 03 / 2015

Amount of Each Disbursement this Period
519.20

Transaction ID : **SB17.I2506**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **2038.40**

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

201510200200289222

**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)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Disbursement this Period

150.50

Transaction ID : SB17.I2507

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Disbursement this Period

215.50

Transaction ID : SB17.I2508

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Disbursement this Period

724.70

Transaction ID : SB17.I2509

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

1090.70

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

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201510200200289223

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2015

Amount of Each Disbursement this Period: 724.70

Transaction ID : SB17.I2510

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2015

Amount of Each Disbursement this Period: 79.00

Transaction ID : SB17.I2511

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2015

Amount of Each Disbursement this Period: 79.00

Transaction ID : SB17.I2512

SUBTOTAL of Disbursements This Page (optional) 882.70

TOTAL This Period (last page this line number only)

201510200200289224

**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 32 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 619616		Amount of Each Disbursement this Period 426.00 Transaction ID : SB17.I2513
City DFW AIRPORT	State TX	
Zip Code 75261	Purpose of Disbursement AIRFARE	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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 619616		Amount of Each Disbursement this Period 426.00 Transaction ID : SB17.I2514
City DFW AIRPORT	State TX	
Zip Code 75261	Purpose of Disbursement AIRFARE	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. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 29.20 Transaction ID : SB17.I2477
City NEW YORK	State NY	
Zip Code 10281-1013	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).....	881.20
TOTAL This Period (last page this line number only).....	

201510200200289225

**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 33 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. AQUESTA BANK

Mailing Address 19510 JETTON RD

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

--

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 31 / 2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I2453

B. AQUESTA BANK

Mailing Address 19510 JETTON RD

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

--

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 31 / 2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I2461

C. AQUESTA BANK

Mailing Address 19510 JETTON RD

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

--

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 30 / 2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I2470

SUBTOTAL of Disbursements This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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201510200200289226

**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 34 OF 55
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2015

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.I2478

Category/Type

B. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2015

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.I2479

Category/Type

C. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 03 / 2015

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.I2480

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 50.00

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

201510200200289227

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 08	DD 21	YYYYYY 2015
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Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I2481

B. BB&T

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 09	DD 01	YYYYYY 2015
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Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.I2502

C. BB&T

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement
BANK SERVICE FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 09	DD 21	YYYYYY 2015
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Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I2516

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

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

55.00

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201510200200289228

**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 36 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. BEST BUY

Mailing Address 10221 PERIMETER PKWY

City CHARLOTTE State NC Zip Code 28216-2441

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

Amount of Each Disbursement this Period

355.06

Transaction ID : SB17.I2460

Category/
Type

B. BISTRO CACAO

Mailing Address 320 MASSACHUSETTES AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
FOOD / BEVERAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 05 / 2015

Amount of Each Disbursement this Period

345.19

Transaction ID : SB17.I2454

Category/
Type

C. CAMBRIDGE ANALYTICA

Mailing Address THE NEWS CORP BUILDING
1211 5TH AVE

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
MICRO-TARGETING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 06 / 2015

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.I2482

Category/
Type

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

25700.25

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

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201510200200289229

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. CAPITOL COMMUNICATIONS, INC.

Mailing Address P.O. BOX 876

City GRANITE FALLS State NC Zip Code 28630

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 06 / 2015

Amount of Each Disbursement this Period

30000.00

Transaction ID : SB17.I2483

Category/
Type

Full Name (Last, First, Middle Initial)

B. CM&CO, LLC

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 06 / 2015

Amount of Each Disbursement this Period

3617.19

Transaction ID : SB17.I2484

Category/
Type

Full Name (Last, First, Middle Initial)

C. CM&CO, LLC

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 11 / 2015

Amount of Each Disbursement this Period

1819.85

Transaction ID : SB17.I2498

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

35437.04

TOTAL This Period (last page this line number only)

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201510200200289230

**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 38 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 07	DD 07	YYYYYY 2015
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Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.I2450

Category/
Type

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 08	DD 06	YYYYYY 2015
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Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.I2457

Category/
Type

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 09	DD 02	YYYYYY 2015
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Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.I2462

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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201510200200289231

**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 39 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 05 / 2015

Amount of Each Disbursement this Period

24.75

Transaction ID : SB17.I2471

B. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2015

Amount of Each Disbursement this Period

10.25

Transaction ID : SB17.I2472

C. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 28 / 2015

Amount of Each Disbursement this Period

10.25

Transaction ID : SB17.I2473

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

45.25

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

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201510200200289232

**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 40 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 06 / 2015

Amount of Each Disbursement this Period: 5.15

Transaction ID : SB17.I2474

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2015

Amount of Each Disbursement this Period: 20.50

Transaction ID : SB17.I2475

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 27 / 2015

Amount of Each Disbursement this Period: 20.25

Transaction ID : SB17.I2476

SUBTOTAL of Disbursements This Page (optional)..... 45.90

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

201510200200289233

**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)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. H2 CAPITAL CONSULTING

Mailing Address 325 7TH ST, NW
STE 400

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FUNDRAISING CONSULTING, TRANSPORTATION, EVENT CATERING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Disbursement this Period

4812.41

Transaction ID : SB17.I2485

Category/
Type

B. H2 CAPITAL CONSULTING

Mailing Address 325 7TH ST, NW
STE 400

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FUNDRAISING CONSULTING, TRANSPORTATION, EVENT CATERING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Disbursement this Period

704.06

Transaction ID : SB17.I2499

Category/
Type

C. H2 CAPITAL CONSULTING

Mailing Address 325 7TH ST, NW
STE 400

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Disbursement this Period

8000.00

Transaction ID : SB17.I2503

Category/
Type

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

13516.47

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

201510200200289234

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)
A. HIGHWOOD CAPITAL, LLC

Mailing Address **915 E ST NW**

City **WASHINGTON** State **DC** Zip Code **20004-2016**

Purpose of Disbursement **FUNDRAISING CONSULTING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **07 / 06 / 2015**

Amount of Each Disbursement this Period: **10000.00**

Transaction ID: **SB17.I2486**

Category/Type

Full Name (Last, First, Middle Initial)
B. JPMORGAN CHASE BANK NA

Mailing Address **PO BOX 15918
MAIL STE DE1-1404**

City **WILMINGTON** State **DE** Zip Code **19850**

Purpose of Disbursement **LODGING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **08 / 10 / 2015**

Amount of Each Disbursement this Period: **225.80**

Transaction ID: **SB17.I2497**

Category/Type

Full Name (Last, First, Middle Initial)
C. HAMPTON INN

Mailing Address **4035 ARENDELL ST**

City **MOREHEAD CITY** State **NC** Zip Code **28557**

Purpose of Disbursement **LODGING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **08 / 10 / 2015**

Amount of Each Disbursement this Period: **225.80**

Transaction ID: **SB17.I2524**

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **10225.80**

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

201510200200289235

**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)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. LAKE NORMAN STORAGE

Mailing Address 18926 W CATAWBA AVE

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.I2448

Category/
Type

B. LAKE NORMAN STORAGE

Mailing Address 18926 W CATAWBA AVE

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2015

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.I2456

Category/
Type

C. LAKE NORMAN STORAGE

Mailing Address 18926 W CATAWBA AVE

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2015

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.I2463

Category/
Type

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

225.00

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

201510200200289236

**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)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY, LLC

Mailing Address **1033 N FAIRFAX ST
SUITE 40**

City **ALEXANDRIA** State **VA** Zip Code **22314-1547**

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM 07	DD 06	YYYY 2015
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Amount of Each Disbursement this Period

1747.01

Transaction ID : **SB17.I2488**

Category/
Type

B. THE STONERIDGE GROUP, LLC

Mailing Address **4400 N POINT PKWY
SUITE 190**

City **ALPHARETTA** State **GA** Zip Code **30022-2472**

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM 07	DD 20	YYYY 2015
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Amount of Each Disbursement this Period

19.95

Transaction ID : **SB17.I2451**

Category/
Type

C. THE STONERIDGE GROUP, LLC

Mailing Address **4400 N POINT PKWY
SUITE 190**

City **ALPHARETTA** State **GA** Zip Code **30022-2472**

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM 08	DD 20	YYYY 2015
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Amount of Each Disbursement this Period

19.95

Transaction ID : **SB17.I2458**

Category/
Type

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

1786.91

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

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201510200200289237

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. THE STONERIDGE GROUP, LLC

Mailing Address **4400 N POINT PKWY
SUITE 190**

City **ALPHARETTA** State **GA** Zip Code **30022-2472**

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : **SB17.I2468**

Category/
Type

B. THE STONERIDGE GROUP, LLC

Mailing Address **4400 N POINT PKWY
SUITE 190**

City **ALPHARETTA** State **GA** Zip Code **30022-2472**

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : **SB17.I2469**

Category/
Type

C. THE STONERIDGE GROUP, LLC

Mailing Address **4400 N POINT PKWY
SUITE 190**

City **ALPHARETTA** State **GA** Zip Code **30022-2472**

Purpose of Disbursement
ONLINE SERVICES, GRAPHIC DESIGN

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : **SB17.I2490**

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

201510200200289238

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)
A. US AIRWAYS

Mailing Address **4000 E SKY HARBOR BLVD**

City **PHOENIX** State **AZ** Zip Code **85034-3802**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 13 / 2015

Amount of Each Disbursement this Period
25.00

Transaction ID : **SB17.I2491**

Category/Type

Full Name (Last, First, Middle Initial)
B. US AIRWAYS

Mailing Address **4000 E SKY HARBOR BLVD**

City **PHOENIX** State **AZ** Zip Code **85034-3802**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 13 / 2015

Amount of Each Disbursement this Period
452.20

Transaction ID : **SB17.I2492**

Category/Type

Full Name (Last, First, Middle Initial)
C. US AIRWAYS

Mailing Address **4000 E SKY HARBOR BLVD**

City **PHOENIX** State **AZ** Zip Code **85034-3802**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2015

Amount of Each Disbursement this Period
90.00

Transaction ID : **SB17.I2517**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **567.20**

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

201510200200289239

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034-3802

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Amount of Each Disbursement this Period

90.00

Transaction ID : SB17.I2518

B. US POSTAL SERVICE

Mailing Address 20311 CHARTWELL CENTER DR

City CORNELIUS State NC Zip Code 28031-5386

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2015

Amount of Each Disbursement this Period

164.00

Transaction ID : SB17.I2494

C. US SENATE

Mailing Address 2 CONSTITUTION AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
PAPER SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2015

Amount of Each Disbursement this Period

165.00

Transaction ID : SB17.I2489

SUBTOTAL of Disbursements This Page (optional)

419.00

TOTAL This Period (last page this line number only)

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201510200200289240

**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 48 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. US SENATE

Mailing Address **2 CONSTITUTION AVE NE**

City **WASHINGTON** State **DC** Zip Code **20002**

Purpose of Disbursement
PRINTING SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 13 / 2015

Amount of Each Disbursement this Period

10.00

Transaction ID : **SB17.I2493**

B. VERIZON

Mailing Address **140 WEST ST**

City **NEW YORK** State **NY** Zip Code **10007-2141**

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 06 / 2015

Amount of Each Disbursement this Period

100.52

Transaction ID : **SB17.I2449**

C. VERIZON

Mailing Address **140 WEST ST**

City **NEW YORK** State **NY** Zip Code **10007-2141**

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 05 / 2015

Amount of Each Disbursement this Period

100.52

Transaction ID : **SB17.I2455**

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

211.04

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

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201510200200289241

**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 49 OF 55

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 140 WEST ST		Amount of Each Disbursement this Period 100.52 Transaction ID : SB17.J2464
City NEW YORK	State NY	
Zip Code 10007-2141	Purpose of Disbursement PHONE 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) B. VONAGE		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 23 MAIN STREET		Amount of Each Disbursement this Period 466.75 Transaction ID : SB17.J2467
City HOLMDEL	State NJ	
Zip Code 07733	Purpose of Disbursement PHONE 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.		Date of Disbursement MM / DD / YYYY
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).....	567.27
TOTAL This Period (last page this line number only).....	101266.62

201510200200289242

**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)

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

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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)
A. STACEY HUGHES

Mailing Address **314 N GARFIELD ST**

City **ARLINGTON** State **VA** Zip Code **22201-1231**

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
07	17	2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : **SB20A.I2519**

Full Name (Last, First, Middle Initial)
B. STEVEN MCCARTHY

Mailing Address **100 HIDDEN STREAM DR**

City **APEX** State **NC** Zip Code **27539**

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	04	2015

Amount of Each Disbursement this Period

500.00

Transaction ID : **SB20A.I2521**

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY

Amount of Each Disbursement this Period

--

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

1500.00

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

1500.00

201510200200289243

**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)

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Thom Tillis Committee

Full Name (Last, First, Middle Initial)

A. PATRIOT COAL CORPORATION PAC

Mailing Address 12312 OLIVE BOULEVARD SUITE 400

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 28 / 2015

City ST LOUIS State MO Zip Code 63141

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
CONTRIBUTION REFUND

--

Transaction ID : SB20C.J2520

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

B.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

C.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

201510200200289244

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Thom Tillis Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cambridge Analytica, LLC

Nature of Debt (Purpose):

Micro-Targeting

Mailing Address **The News Corp Building, STE 2703**

City State Zip Code
New York NY 10036

Outstanding Balance Beginning This Period

50000.00

Transaction ID : **SD01.00004**

Amount Incurred This Period

0.00

Payment This Period

25000.00

Outstanding Balance at Close of This Period

25000.00

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

Capitol Communications, Inc.

Nature of Debt (Purpose):

Management Consulting

Mailing Address **PO Box 876**

City State Zip Code
Granite Falls NC 28630

Outstanding Balance Beginning This Period

75000.00

Transaction ID : **SD01.00003**

Amount Incurred This Period

0.00

Payment This Period

30000.00

Outstanding Balance at Close of This Period

45000.00

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

CM&Co, LLC

Nature of Debt (Purpose):

Accounting Services

Mailing Address **PO Box 97275**

City State Zip Code
Raleigh NC 27624

Outstanding Balance Beginning This Period

5437.04

Transaction ID : **SD01.00060**

Amount Incurred This Period

4641.18

Payment This Period

5437.04

Outstanding Balance at Close of This Period

4641.18

1) **SUBTOTALS** This Period This Page (optional) ...

74641.18

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

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

201510200200289245

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
dot the i

Nature of Debt (Purpose):
Direct Mail Services

Mailing Address **2825 Glendale Rd**

City State Zip Code
Charlotte NC 28209

Outstanding Balance Beginning This Period **0.00** Transaction ID : **SD01.00070**

Amount Incurred This Period **500.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **500.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
H2 Capital Consulting, LLC

Nature of Debt (Purpose):
Site Fee/Food/Beverage

Mailing Address **325 7th Street, NW Suite 400**

City State Zip Code
Washington DC 20004

Outstanding Balance Beginning This Period **5183.67** Transaction ID : **SD01.00038**

Amount Incurred This Period **32332.80** Payment This Period **13516.47** Outstanding Balance at Close of This Period **24000.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Highwood Capital, LLC

Nature of Debt (Purpose):
Fundraising Consulting

Mailing Address **915 E St, NW, #613**

City State Zip Code
Washington DC 20004

Outstanding Balance Beginning This Period **31694.70** Transaction ID : **SD01.00006**

Amount Incurred This Period **15000.00** Payment This Period **10000.00** Outstanding Balance at Close of This Period **36694.70**

1) **SUBTOTALS** This Period This Page (optional) ... **61194.70**

2) **TOTALS** This Period (last page this line number) ...

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

201510200200289246

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Thom Tillis Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
integram

Nature of Debt (Purpose):
Direct Mail Services

Mailing Address 22695 Commerce Center Ct

City State Zip Code
Dulles VA 20166

Outstanding Balance Beginning This Period **0.00** Transaction ID : SD01.00071

Amount Incurred This Period **1446.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **1446.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lucy Croxton Consulting

Nature of Debt (Purpose):
Fundraising Consulting, Insurance, Lodgi

Mailing Address 1315 East Blvd, Apt 311

City State Zip Code
Charlotte NC 28203

Outstanding Balance Beginning This Period **17000.00** Transaction ID : SD01.00039

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **17000.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Macon Consulting

Nature of Debt (Purpose):
Fundraising Consulting

Mailing Address PO Box 3962

City State Zip Code
Greenville NC 27836

Outstanding Balance Beginning This Period **125000.00** Transaction ID : SD01.00002

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **125000.00**

1) **SUBTOTALS** This Period This Page (optional) ... **143446.00**

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

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

201510200200289247

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Thom Tillis Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OnMessage, Inc.

Nature of Debt (Purpose):

Advertising, Advertising Production

Mailing Address 705 Melvin Ave. #105

City State Zip Code
Annapolis MD 21401

Outstanding Balance Beginning This Period

64026.35

Transaction ID : SD01.00001

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

64026.35

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

Precision Marketing, Inc.

Nature of Debt (Purpose):

Direct Mail Services

Mailing Address PO Box 7670

City State Zip Code
Arlington VA 22207

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD01.00072

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

Targeted Victory, LLC

Nature of Debt (Purpose):

Online Services, Email Services

Mailing Address 1033 N. Fairfax ST, Suite 40

City State Zip Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1612.01

Transaction ID : SD01.00061

Amount Incurred This Period

135.00

Payment This Period

1747.01

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ... ▶

65526.35

2) **TOTALS** This Period (last page this line number only) ... ▶

344808.23

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

344808.23

201510200200289248



7011 0110 0001 2404 3403

U.S. POSTAGE
RALEIGH, NC
NOV 9 1995
AMOUNT
\$6.41
R2304M113707-12



20013



1000

Senate Office of Public Records
P.O. Box 77578
Washington, DC 20013-7578

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BY THE SENATE
POST OFFICE**

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED 10-14-15
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

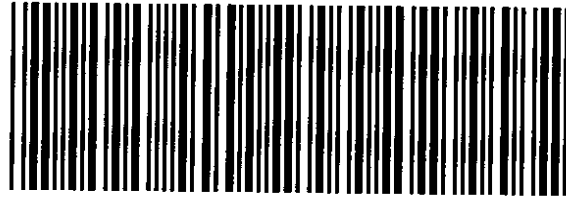
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

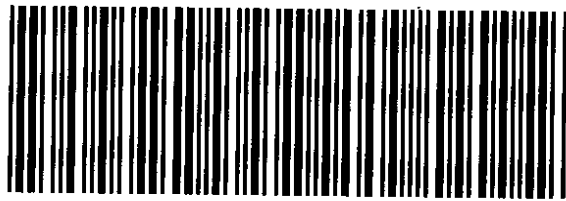
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-20-15

201510200200289250



SEN PATCH



SEN PATCH

2015102002002889251