



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Edwin Peacock For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 04 / 18 / 2012

	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))....	18430.59	73890.67
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18430.59	73890.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	39452.09	67013.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	39452.09	67013.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	256876.07	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	249999.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Edwin Peacock For Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13456.37	53940.38
(ii) Unitemized.....	4974.22	19950.29
(iii) TOTAL of contributions from individuals ▶	18430.59	73890.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18430.59	73890.67
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	249999.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	249999.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	18430.59	323889.67

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39452.09	67013.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	39452.09	67013.60

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	277897.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18430.59
25. SUBTOTAL (add Line 23 and Line 24).....	296328.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39452.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	256876.07

**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 24
	<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)  
**Edwin Peacock For Congress**

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

Mailing Address 395 La Casa Via

City Walnut Creek State CA Zip Code 94588

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

Name of Employer Northwestern Mutual Occupation Financial Rep

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5357**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**C Tait Cruse**

Mailing Address 12221 Merit Drive

City Dallas State TX Zip Code 75251

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5361**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jennie Derby**

Mailing Address 3246 Park Rd.

City Charlotte State NC Zip Code 28209

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

Name of Employer LifeSpan, Inc. Occupation Social Service Rehabilitation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2012

**Transaction ID : SA11AI.5365**

Amount of Each Receipt this Period  
 291.00

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

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

791.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard A. DeVita Jr.**

Mailing Address 5813 Camilla Dr.

City State Zip Code  
Charlotte NC 28226

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

Name of Employer Occupation  
Northwestern Mutual CLU, ChFC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1456.20

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 01 / 2012

**Transaction ID : SA11AI.5366**

Amount of Each Receipt this Period  
1456.20

**B.** Full Name (Last, First, Middle Initial)  
**Patrick DiCerbo**

Mailing Address 1201 Troy Schenectady Rd

City State Zip Code  
Latham NY 12110

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

Name of Employer Occupation  
Northwestern Mutual Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2012

**Transaction ID : SA11AI.5367**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Brendan Donelson**

Mailing Address 398 Grovehurst Lane

City State Zip Code  
Brentwood TN 37027

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

Name of Employer Occupation  
Access National Mortgage Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2012

**Transaction ID : SA11AI.5356**

Amount of Each Receipt this Period  
250.00

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

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

1956.20

**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 24  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James F. Downs**

Mailing Address 1959 S. Wendover Rd.

City Charlotte State NC Zip Code 28211

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

Name of Employer Crosland Occupation Principal

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2012

**Transaction ID : SA11AI.5368**

Amount of Each Receipt this Period  
 334.25

**B.** Full Name (Last, First, Middle Initial)  
**Tom Gabbard**

Mailing Address 236 N. Laurel Avenue

City Charlotte State NC Zip Code 28207

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

Name of Employer Blumenthal Performing Arts Center Occupation CEO

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2012

**Transaction ID : SA11AI.5373**

Amount of Each Receipt this Period  
 238.75

**C.** Full Name (Last, First, Middle Initial)  
**Art Gallagher**

Mailing Address 1248 Dilworth Crescent Row

City Charlotte State NC Zip Code 28203

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

Name of Employer Johnson & Wales University Occupation President

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5374**

Amount of Each Receipt this Period  
 500.00

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

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

1073.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>Grant Gier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012
Mailing Address 25447 Abbey Glen Drive		<b>Transaction ID : SA11AI.5376</b>
City Hawthorn Woods	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Mutual	Occupation Financial Representative	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Timothy Harrison</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012
Mailing Address 14102 Eagle Run Drive		<b>Transaction ID : SA11AI.5384</b>
City Omaha	State NE	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Mutual	Occupation Financial Representative	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Kim Heilman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2012
Mailing Address 2015 Woodhaven Road		<b>Transaction ID : SA11AI.5385</b>
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerard Hempstead**

Mailing Address 701 Market Street

City St. Louis State MO Zip Code 63105

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5386**

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Hendon**

Mailing Address 6611 Lybrook Court

City Bethesda State MD Zip Code 20817

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

Name of Employer Marketech Services Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2012

**Transaction ID : SA11AI.5387**

Amount of Each Receipt this Period

321.17

**C.** Full Name (Last, First, Middle Initial)  
**Ira Hermann**

Mailing Address 1500 Quail Street

City Newport Beach State CA Zip Code 92660

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5388**

Amount of Each Receipt this Period

250.00

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

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

821.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amy Holz**

Mailing Address 530 Glynn Meadow Lane

City Roswell State GA Zip Code 30075

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

Name of Employer Amy Holz, Inc. Occupation Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.5390**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Rodney Hood**

Mailing Address 3428 Rugby Road

City Durham State NC Zip Code 27707

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

Name of Employer J P Morgan Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
516.40

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : SA11AI.5088**

Amount of Each Receipt this Period  
516.40

In-kind - Host campaign event

**C.** Full Name (Last, First, Middle Initial)  
**Harry Hoopis**

Mailing Address 5215 Old Orchard Road

City Skokie State IL Zip Code 60077

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

Name of Employer Northwestern Mutual Occupation Managing Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5391**

Amount of Each Receipt this Period  
250.00

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

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

1016.40

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

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

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

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NAME OF COMMITTEE (In Full)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Huckabee**

Mailing Address 6320 Quadrangle Drive

City State Zip Code  
 Chapel NC 27517

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

Name of Employer Occupation  
 Northwestern Mutual Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5393**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 3904 Holmbank Court

City State Zip Code  
 Richmond VA 23233

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

Name of Employer Occupation  
 Northwestern Mutual Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5395**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel LaFar**

Mailing Address 2070 Queens Rd. East

City State Zip Code  
 Charlotte NC 28207

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

Name of Employer Occupation  
 TargetCare President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 477.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.5401**

Amount of Each Receipt this Period  
 477.50

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

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

977.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger Lowrey**

Mailing Address 2321 Whitney Avenue

City Hamden State CT Zip Code 06437

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5404**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Douglas J. Lundell**

Mailing Address 299 Bailey Avenue

City Rock Hill State SC Zip Code 29732

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

Name of Employer Comporium Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.5405**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert E. Mason**

Mailing Address 1550 Queens Road

City Charlotte State NC Zip Code 28207

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.5406**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<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)  
**Edwin Peacock For Congress**

**A. Dexter Means**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2901 Telestar Court  
 City Falls Church State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Northwestern Mutual Occupation Financial Representative  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 16 / 2012  
**Transaction ID : SA11AI.5407**  
 Amount of Each Receipt this Period  
 250.00

**B. Kashyap B. Patel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14820 Jockey's Ridge Drive  
 City Charlotte State NC Zip Code 28277  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Carolina Blood & Cancer Occupation Hematologist  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2012  
**Transaction ID : SA11AI.5412**  
 Amount of Each Receipt this Period  
 500.00

**C. Brian Petrando**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 Summit Avenue  
 City Fort Worth State TX Zip Code 76102  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Northwestern Mutual Occupation Financial Rep  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 16 / 2012  
**Transaction ID : SA11AI.5414**  
 Amount of Each Receipt this Period  
 250.00

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Roth**

Mailing Address 29 South Main Street

City W. Hartford State CT Zip Code 06107

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5417**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Louis F. Santospago**

Mailing Address 5905 Lismore Valley Lane

City Charlotte State NC Zip Code 28226

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

Name of Employer Environamics, Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.5418**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Saunders**

Mailing Address 111 Hermitage Road

City Charlotte State NC Zip Code 28207

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

Name of Employer Fennebresque & Co Occupation Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 09 / 2012

**Transaction ID : SA11AI.5419**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Savino**

Mailing Address 731 Alexander Road

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Northwestern Mutual Financial Represenati

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2012

**Transaction ID : SA11AI.5420**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Seager**

Mailing Address 10306 Eaton Place

City State Zip Code  
Fairfax VA 53202

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

Name of Employer Occupation  
Northwestern Mutual Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2012

**Transaction ID : SA11AI.5422**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Brad Seitzinger**

Mailing Address 1672 Chieftan Circle

City State Zip Code  
Oxford MI 48084

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

Name of Employer Occupation  
Northwestern Mutual Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2012

**Transaction ID : SA11AI.5423**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alice Smyth**

Mailing Address 2631 Beverwyck Rd.

City	State	Zip Code
Charlotte	NC	28211

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 321.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2012

**Transaction ID : SA11AI.5425**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 321.10

**B.** Full Name (Last, First, Middle Initial)  
**Tim Stark**

Mailing Address 4402 Ponoma Road

City	State	Zip Code
Dallas	TX	75225

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

Name of Employer	Occupation
Northwestern Mutual	Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5426**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joe Teague**

Mailing Address 1151 N Westmore Blvd

City	State	Zip Code
Tampa	FL	33607

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

Name of Employer	Occupation
Northwestern Mutual	Financial Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.5430**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 821.10

\_\_\_\_\_



**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 24
	<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)  
**Edwin Peacock For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marvin L. White**

Mailing Address 330 Wendover Hill Court

City State Zip Code  
Charlotte NC 28211

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

Name of Employer Occupation  
Johnston, Allison, & Hord Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2012

**Transaction ID : SA11AI.5438**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**James R. Worrell**

Mailing Address 2218 Hopedale Avenue

City State Zip Code  
Charlotte NC 28207

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

Name of Employer Occupation  
Northwestern Mutual Managing Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2012

**Transaction ID : SA11AI.5440**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

13456.37

**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 18 OF 24			
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. American Technology Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 307 S Picket Street		Amount of Each Disbursement this Period 9,999.99 1325.93
City Alexandria	State VA	
Zip Code 22304		
Purpose of Disbursement polling		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>B. Charlotte Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 201 N McDowell Street		Amount of Each Disbursement this Period 9,999.99 1618.55
City Charlotte	State NC	
Zip Code 28204		
Purpose of Disbursement postage		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>c. Charlotte Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 201 N McDowell Street		Amount of Each Disbursement this Period 9,999.99 6990.23
City Charlotte	State NC	
Zip Code 28204		
Purpose of Disbursement postage		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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9934.71
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 24			
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. Donahue Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 1202 Main Street		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : SB17.4630</b>
City Columbia	State SC	
Zip Code 29201	Purpose of Disbursement advertising	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>B. Donahue Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 1202 Main Street		Amount of Each Disbursement this Period 5025.13 <b>Transaction ID : SB17.4631</b>
City Columbia	State SC	
Zip Code 29201	Purpose of Disbursement advertising	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>c. Henburn Apparels</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address P O Box 1917		Amount of Each Disbursement this Period 1617.26 <b>Transaction ID : SB17.4643</b>
City Indian Trail	State NC	
Zip Code 28079	Purpose of Disbursement t shirts	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16642.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 24	
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. Rodney Hood</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 3428 Rugby Road		Amount of Each Disbursement this Period 516.40
City Durham	State NC	
Zip Code 27707	Purpose of Disbursement In-kind - Host campaign event	Transaction ID : SB17.5090
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IMIGpro Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2838 C Queen City Dr		Amount of Each Disbursement this Period 1120.39
City Charlotte	State NC	
Zip Code 28208	Purpose of Disbursement videos	Transaction ID : SB17.4633
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. M &amp; M Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 1866.30
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement signs	Transaction ID : SB17.4639
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3503.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 24		
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 2170.43 <b>Transaction ID : SB17.4640</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing postcards	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>B. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 288.01 <b>Transaction ID : SB17.4641</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing letters	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>c. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 3444.34 <b>Transaction ID : SB17.4644</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing postcards	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5902.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 24	
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 1001.80 <b>Transaction ID : SB17.4645</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing letters	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>B. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 1400.15 <b>Transaction ID : SB17.4646</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing letters	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>c. M &amp; M Graphics</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address P. O. Box 36633		Amount of Each Disbursement this Period 442.17 <b>Transaction ID : SB17.4647</b>
City Charlotte	State NC	
Zip Code 28236-6633	Purpose of Disbursement printing letters	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2844.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 24	
	<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)  
**Edwin Peacock For Congress**

Full Name (Last, First, Middle Initial) <b>A. Kay Parrish</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2012
Mailing Address 4281 Maybrook St. SW		Amount of Each Disbursement this Period 500.00
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement help with accounting	Transaction ID : SB17.4634
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	39327.09

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

NAME OF COMMITTEE (In Full) **Edwin Peacock For Congress** Transaction ID : **SC/10.4105**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Edwin Peacock For Congress</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1115 East Morehead St.	

City	State	ZIP Code
Charlotte	NC	28204

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
249999.00	0.00	249999.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 30 / 2012	5/9/2012	4.37 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	249999.00
<b>TOTALS</b> This Period (last page in this line only).....	249999.00

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