

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Walker 4 NC

ADDRESS (number and street)
▼

PO Box 99247

Check if different
than previously
reported. (ACC)

Raleigh

NC

27624

2. **FEC IDENTIFICATION NUMBER ▼**

C C00543231

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NC

06

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Collin McMichael

Signature of Treasurer

Collin McMichael

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 68

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

	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))....	95800.16	684919.20
(b) Total Contribution Refunds (from Line 20(d))	30.00	760.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	95770.16	684159.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	106217.48	500204.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	16740.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	106217.48	483463.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	261777.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 68

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

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).....

61200.00

364171.57

(ii) Unitemized.....

4900.16

29740.75

(iii) TOTAL of contributions from individuals ▶

66100.16

393912.32

(b) Political Party Committees.....

0.00

0.00

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

29700.00

291006.88

(d) The Candidate.....

0.00

0.00

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

95800.16

684919.20

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

16740.88

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)..... ▶

95800.16

701660.08

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 68

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	106217.48	500204.24
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	30.00	230.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	530.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	30.00	760.00
21. OTHER DISBURSEMENTS	7000.00	14624.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	113247.48	515588.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	279224.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	95800.16
25. SUBTOTAL (add Line 23 and Line 24).....	375024.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	113247.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	261777.38

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3N
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 68

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Shahzad Akbar

Mailing Address 3706 Worthing Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Self-Employed Occupation Hotelier

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 07 / 2016

Transaction ID : SA11AI.12898

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 5306 Fitzhugh Trl

City Summerfield State NC Zip Code 27358-9013

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

Name of Employer Unique Collating & Bindery Occupation Sales & Office Manager/Owner

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 12 / 2016

Transaction ID : SA11AI.12933

Amount of Each Receipt this Period

50.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Ruth S Bevis

Mailing Address 8607 Rocky Ln

City Stokesdale State NC Zip Code 27357

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

Name of Employer Bryan Bevis Occupation Secretary

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2016

Transaction ID : SA11AI.13002

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

650.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Douglas G Boike

Mailing Address 5919 Tarleton Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triad Consulting

Occupation

Consultant

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12837

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wayne R Boyles

Mailing Address 5811 Wessex Ln

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Self-Employed

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : SA11AI.12792

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Missy J Branson

Mailing Address 1160 1st Street, NE
Apt 1214

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Branson360

Occupation

President

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

Transaction ID : SA11AI.12875

Amount of Each Receipt this Period

250.00

☐ Memo Item

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Cindy Brown

Mailing Address 7007 Mustang Court

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summerfield Family Chiropracti

Occupation

Chiropractor

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Transaction ID : SA11AI.12811

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gary Brown

Mailing Address 5249 Larue Ct

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12856

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dr. William M Brown

Mailing Address 1002 N. Church Street
Suite 100

City

Greensboro

State

NC

Zip Code

27401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12863

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Roy Carroll

Mailing Address PO Box 9846

City

Greensboro

State

NC

Zip Code

27429

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Carroll CompaniesOccupation
CEO

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2016

Transaction ID : SA11Al.12808

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vanessa Carroll

Mailing Address PO Box 9846

City

Greensboro

State

NC

Zip Code

27429

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2016

Transaction ID : SA11Al.12806

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jerry Ralph Clark

Mailing Address 2802 Lake Forest Drive

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Orthodontist

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		06		2016

Transaction ID : SA11Al.12824

Amount of Each Receipt this Period

500.00

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

5900.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Justin C Conrad

A.

Mailing Address 1717 Hobbs Rd

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Libby Hill Seafood

Occupation

Owner

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13026

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Frances Ann DeJoy

B.

Mailing Address PO Box 527

City

Cold Spring Harbor

State

NY

Zip Code

11724

FEC ID number of contributing
federal political committee.

C

Name of Employer

LDJ Global Strategies

Occupation

Manager

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General
Special-Primary

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12869

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Louis DeJoy

C.

Mailing Address 806 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

LDJ Global Strategies

Occupation

CEO

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General
Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12871

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

5650.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 68

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address PO Box 18367

City Greensboro State NC Zip Code 27419

FEC ID number of contributing federal political committee. C

Name of Employer LDJ Global Strategies Occupation Executive

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
2700.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2016

Transaction ID : SA11AI.12868

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

Mailing Address 4704 Towne Ridge Dr

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
205.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2016

Transaction ID : SA11AI.12862

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
J Brad Edwards

Mailing Address 403 Lloyds Ln

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Federal Affairs

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2016

Transaction ID : SA11AI.12874

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

3300.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sam Geduldig

Mailing Address 1101 K Street NW

STE 650

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clark, Geduldig, Cranford Nels

Occupation

Lobbyist

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.13152

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Louise H Graham

Mailing Address 3980 Bittle Rd

City

Gibsonville,

State

NC

Zip Code

27249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.13189

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Phil R Graham

Mailing Address 3980 Bittle Rd

City

Gibsonville

State

NC

Zip Code

27249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.13191

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

5650.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

James Groce

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Transaction ID : SA11AI.12872

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Groce

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : SA11AI.12820

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Groce

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

1650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : SA11AI.12821

Amount of Each Receipt this Period

250.00

☐ Memo Item

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

James Groce

A.

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12919

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Groce

B.

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

2150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2016

Transaction ID : SA11AI.12995

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nancy Ham

C.

Mailing Address 4 Deerwood Court

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

5480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12851

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

3200.00

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)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 5016 Casting Way

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 924.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 31 / 2016

Transaction ID : SA11AI.12819

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Mailing Address 1701 S. Par Drive

City Reidsville State NC Zip Code 27320

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2016

Transaction ID : SA11AI.12929

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 2305 Hilltop Trail

City Jamestown State NC Zip Code 27282

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Hotel Owner

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 07 / 2016

Transaction ID : SA11AI.12890

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1250.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Cheryl L Kingman

Mailing Address 223 Oakmont Dr

City

Advance

State

NC

Zip Code

27006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

5730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.13190

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Charisse Kleinman

Mailing Address 1801 Carlisle Road

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Daly Seven

Occupation

President, Hotel Insp and Quality Cont

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

2530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13023

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Phil Kleinman

Mailing Address 1801 Carlisle Road

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Premier Stores, Inc.

Occupation

Owner

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13024

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

7000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 68

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

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NAME OF COMMITTEE (In Full)
Walker 4 NCFull Name (Last, First, Middle Initial)
A. David M Kuratnick

Mailing Address 1812 Nottingham Rd

City	State	Zip Code
Greensboro	NC	27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

6700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12861

Amount of Each Receipt this Period

2700.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B. Mohammad Danish Lateef

Mailing Address 25 Winding Ridge Road

City	State	Zip Code
Durham	NC	27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Physician

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.12892

Amount of Each Receipt this Period

250.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
C. Rachel B LawrenceMailing Address 123 Shorelake Dr
Apt A

City	State	Zip Code
Greensboro	NC	27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : SA11AI.12876

Amount of Each Receipt this Period

100.00

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

3050.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Tim Locke

Mailing Address 2111 Woodmont Road

City

Alexandria

State

VA

Zip Code

22307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Smith-Free Group

Occupation

Government Relations

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2016

Transaction ID : SA11AI.12996

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Janice Maness

Mailing Address 7375 Doggett Rd

City

Browns Summit

State

NC

Zip Code

27214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General
Special-Primary

Election Cycle-to-Date

2126.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		23		2016

Transaction ID : SA11AI.12781

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Janice Maness

Mailing Address 7375 Doggett Rd

City

Browns Summit

State

NC

Zip Code

27214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2226.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13005

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

450.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)

Robert A. J. McGrady

Mailing Address 100 Pineburr Rd

City

Greensboro

State

NC

Zip Code

27455-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2016

Transaction ID : SA11AI.12784

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Robert A. J. McGrady

Mailing Address 100 Pineburr Rd

City

Greensboro

State

NC

Zip Code

27455-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12850

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kenneth J Miller

Mailing Address 100 Kemp Rd W

City

Greensboro

State

NC

Zip Code

27410-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance

Receipt For: 2016

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13025

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 5807 Stanley Huff Rd

City	State	Zip Code
Summer Field	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tri-City Mechanical ContractorOccupation
President

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.12885

Amount of Each Receipt this Period

2700.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ryan A Newkirk

Mailing Address 3601 Timberoak Dr

City	State	Zip Code
Greensboro	NC	27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Trust BankOccupation
Senior Vice President

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Transaction ID : SA11AI.12932

Amount of Each Receipt this Period

750.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Frances M Olmsted

Mailing Address 5125 Bunch Road

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

3200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.12805

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

6150.00

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

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

FOR LINE NUMBER:

PAGE 21 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Gary Oyster

Mailing Address PO Box 189

City

Franklinton

State

NC

Zip Code

27525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gary Oyster, Dds

Occupation

Dentist

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : SA11AI.12788

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Benjamin Parnell

Mailing Address 220 Woodlyn Dr

City

Reidsville

State

NC

Zip Code

27320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2016

Transaction ID : SA11AI.12780

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Larry W Pearman

Mailing Address 4810 Carlson Valley Rd

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.13022

Amount of Each Receipt this Period

700.00

☐ Memo Item

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

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

1900.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 208 Twin Creeks Dr

City Stokesdale State NC Zip Code 27357

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1050.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2016

Transaction ID : SA11AI.12858

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Risa P Spradling

Mailing Address 3603 Summit Lakes Drive

City Browns Summit State NC Zip Code 27214

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
8100.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2016

Transaction ID : SA11AI.12860

Amount of Each Receipt this Period

2700.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Sumner Spradling

Mailing Address 3603 Summit Lakes Drive

City Browns Summit State NC Zip Code 27214

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
8100.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2016

Transaction ID : SA11AI.12859

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

6400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Stan Tennant

Mailing Address 4327 Four Farms Lane

City Greensboro State NC Zip Code 27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Physician

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.12927

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 7615 Royster Road

City Greensboro State NC Zip Code 27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guilford Eye CenterOccupation
Optometrist

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.12920

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Mailing Address 5698 Green Dale Ct

City Summerfield State NC Zip Code 27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
RF Micro DevicesOccupation
Engineer

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

5350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12857

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Susan M Woods

Mailing Address 214 Kensington Rd

City

Greensboro

State

NC

Zip Code

27403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : SA11AI.12873

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Aldona A Wos MD

Mailing Address 806 Country Club Drive

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SA11AI.12870

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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

☐ Memo Item

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

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

2950.00

61200.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH STREET NW

SUITE 802

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		23		2016

Transaction ID : SA11C.12777

Amount of Each Receipt this Period

1000.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW

SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		06		2016

Transaction ID : SA11C.12867

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

Mailing Address 919 18TH STREET, NW

SUITE 300

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C C00038604

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2016

Transaction ID : SA11C.13032

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

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

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 601 13TH STREET, NW
12TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00251876

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12912

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

Mailing Address 300 BOSTON SCIENTIFIC WAY

City State Zip Code
MARLBOROUGH MA 01752

FEC ID number of contributing
federal political committee.

C C00357863

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12879

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing
federal political committee.

C C00008474

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12910

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)
COMMITTEE FOR/ADV OF SE COTTON (CASC) SOUTHERN COTTONGROWERS INC/SE COTTON GINNERS ASSN

A. Mailing Address 139 PROMINENCE COURT
STE. 110

City State Zip Code
DAWSONVILLE GA 30534

FEC ID number of contributing
federal political committee.

C C00300426

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12914

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT PAT NADOLSKI

Mailing Address 616 FOUNTAIN PLACE

City State Zip Code
BURLINGTON NC 27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2016

Transaction ID : SA11C.13030

Amount of Each Receipt this Period

200.00

☐ Memo Item

Permissible Funds

Full Name (Last, First, Middle Initial)

C. CORNING INCORPORATED EMPLOYEES POLITICAL ACTION COMMITTEE (COREPAC)

Mailing Address 325 7TH STREET NW
Suite 600

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00033589

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
05 26 2016

Transaction ID : SA11C.13181

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2200.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
 SOUTH BUILDING, SUITE 600

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		13		2016

Transaction ID : SA11C.12936

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DUKE ENERGY CORPORATION PAC

Mailing Address 550 SOUTH TRYON STREET

City	State	Zip Code
CHARLOTTE	NC	28202

FEC ID number of contributing
federal political committee.

C C00083535

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2016

Transaction ID : SA11C.13029

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE

Mailing Address PO BOX 2485

City	State	Zip Code
SPRINGFIELD	VA	22152

FEC ID number of contributing
federal political committee.

C C00467431

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2016

Transaction ID : SA11C.13041

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

4500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing
federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
05 26 2016

Transaction ID : SA11C.13180

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 31 2016

Transaction ID : SA11C.12802

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
MASON CONTRACTORS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE-MACPAC

Mailing Address 1481 MERCHANT DRIVE

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C C00291799

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12934

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12918

Amount of Each Receipt this Period

3000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Mailing Address 469 HOSPITAL DR.
SUITE C

City State Zip Code
GASTONIA NC 28054

FEC ID number of contributing
federal political committee.

C C00405555

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 26 2016

Transaction ID : SA11C.13178

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 540

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00130773

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2016

Transaction ID : SA11C.13039

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)

Mailing Address 2055 L STREET, NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00003764

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12915

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing
federal political committee.

C C00053553

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12916

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN PAC)

Mailing Address 1666 K STREET, NW
SUITE 500

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing
federal political committee.

C C00473652

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
05 26 2016

Transaction ID : SA11C.13179

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

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

A.

Mailing Address 1775 PENNSYLVANIA AVENUE NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00363945

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2016

Transaction ID : SA11C.13038

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
THE GOODYEAR TIRE & RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR GOOD GOVERNMENT FUND)

B.

Mailing Address 200 INNOVATION WAY

City State Zip Code
AKRON OH 44316

FEC ID number of contributing
federal political committee.

C C00100131

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
06 07 2016

Transaction ID : SA11C.12911

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION

C.

Mailing Address 4301 WILSON BOULEVARD

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
06 29 2016

Transaction ID : SA11C.13034

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4500.00

29700.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 236 E. Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
Greensboro	NC	27401

Amount of Each Disbursement this Period

495.00

Purpose of Disbursement
TransportationCategory/
Type☐ Memo Item

Transaction ID : SB17.13108

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. Amtrak

Mailing Address 236 E. Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		21		2016

City	State	Zip Code
Greensboro	NC	27401

Amount of Each Disbursement this Period

61.00

Purpose of Disbursement
TransportationCategory/
Type☐ Memo Item

Transaction ID : SB17.13113

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. Amtrak

Mailing Address 236 E. Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2016

City	State	Zip Code
Greensboro	NC	27401

Amount of Each Disbursement this Period

189.00

Purpose of Disbursement
TransportationCategory/
Type☐ Memo Item

Transaction ID : SB17.13126

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).....

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

745.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
05		24		2016

Amount of Each Disbursement this Period

10.05

☐ Memo Item

Transaction ID : SB17.12969

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
05		24		2016

Amount of Each Disbursement this Period

29.85

☐ Memo Item

Transaction ID : SB17.12970

C. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
05		26		2016

Amount of Each Disbursement this Period

43.50

☐ Memo Item

Transaction ID : SB17.12988

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

83.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
05		31		2016

Amount of Each Disbursement this Period

4	3	2	1	0	.	0	5
---	---	---	---	---	---	---	---

☐ Memo Item

Transaction ID : SB17.13147

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
06		02		2016

Amount of Each Disbursement this Period

3	0	.	1	5
---	---	---	---	---

☐ Memo Item

Transaction ID : SB17.13047

C. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

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
06		07		2016

Amount of Each Disbursement this Period

4	3	5	.	6	0
---	---	---	---	---	---

☐ Memo Item

Transaction ID : SB17.13061

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

475.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2016

Amount of Each Disbursement this Period

57.45

☐ Memo Item

Transaction ID : SB17.13062

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2016

Amount of Each Disbursement this Period

2.25

☐ Memo Item

Transaction ID : SB17.13075

C. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2016

Amount of Each Disbursement this Period

2.25

☐ Memo Item

Transaction ID : SB17.13100

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

61.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 28 / 2016

Amount of Each Disbursement this Period

10.05

☐ Memo Item

Transaction ID : SB17.13134

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 29 / 2016

Amount of Each Disbursement this Period

10.05

☐ Memo Item

Transaction ID : SB17.13137

C. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2016

Amount of Each Disbursement this Period

1.57

☐ Memo Item

Transaction ID : SB17.13144

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

21.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address PO Box 8999

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2016

City	State	Zip Code
San Francisco	CA	94128-8999

Amount of Each Disbursement this Period

Purpose of Disbursement
Merchant Fees

38577.95

Candidate Name

☐ Memo Item

Transaction ID : SB17.13048

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/
Type

Full Name (Last, First, Middle Initial)

B. Axiom StrategiesMailing Address 1251 NW Briarcliff Pkwy
STE 85

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
Kansas City	MO	64116

Amount of Each Disbursement this Period

Purpose of Disbursement
Direct Mail Services

8550.00

Candidate Name

☐ Memo Item

Transaction ID : SB17.12960

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/
Type

Full Name (Last, First, Middle Initial)

C. Axiom StrategiesMailing Address 1251 NW Briarcliff Pkwy
STE 85

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

City	State	Zip Code
Kansas City	MO	64116

Amount of Each Disbursement this Period

Purpose of Disbursement
Advertising

30000.00

Candidate Name

☐ Memo Item

Transaction ID : SB17.13063

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/
Type**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

38577.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Axiom StrategiesMailing Address 1251 NW Briarcliff Pkwy
STE 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement
Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2016

Amount of Each Disbursement this Period

12088.00

☐ Memo Item

Transaction ID : SB17.13095

B. BB&T

Mailing Address 201 West Market Street

City Greensboro State NC Zip Code 27401

Purpose of Disbursement
Bank Service Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

Amount of Each Disbursement this Period

16.00

☐ Memo Item

Transaction ID : SB17.12957

C. BB&T

Mailing Address 201 West Market Street

City Greensboro State NC Zip Code 27401

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2016

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Transaction ID : SB17.13045

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

12109.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 201 West Market Street

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Bank Service Fees

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 21 / 2016

Amount of Each Disbursement this Period

73.00

☐ Memo Item

Transaction ID : SB17.13116

B. Noah Beelendorf

Mailing Address 1491 Rob Roy Court

City	State	Zip Code
Summerfield	NC	27298

Purpose of Disbursement
Field Supervisor

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.12965

c. Noah Beelendorf

Mailing Address 1491 Rob Roy Court

City	State	Zip Code
Summerfield	NC	27298

Purpose of Disbursement
Field Supervisor

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.13066

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

1073.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. BP Gas

Mailing Address 2512 Battleground Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
Greensboro	NC	27408

Amount of Each Disbursement this Period

679.17

Purpose of Disbursement
FuelCategory/
Type☐ Memo Item

Transaction ID : SB17.12949

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. Chick-Fil-A

Mailing Address 516 Stirling St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2016

City	State	Zip Code
Greensboro	NC	27412

Amount of Each Disbursement this Period

83.05

Purpose of Disbursement
Food/BeverageCategory/
Type☐ Memo Item

Transaction ID : SB17.13130

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. Citi Cards

Mailing Address PO Box 9001037

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2016

City	State	Zip Code
Louisville	KY	40290

Amount of Each Disbursement this Period

560.78

Purpose of Disbursement
Food/BeverageCategory/
Type☐ Memo Item

Transaction ID : SB17.12989

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

679.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Chick-Fil-A

Mailing Address 516 Stirling St

City	State	Zip Code
Greensboro	NC	27412

Purpose of Disbursement
Food/Beverage

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Disbursement this Period

560.78

☒ Memo Item

Transaction ID : SB17.12989.0

B. CM&Co, LLC

Mailing Address PO Box 97275

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 14 / 2016

Amount of Each Disbursement this Period

2469.30

☐ Memo Item

Transaction ID : SB17.13096

c. Congressional InstituteMailing Address 900 2nd Street NE
Suite 303

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Entrance Fee

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 23 / 2016

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Transaction ID : SB17.13127

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

2719.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Country Barbecue

Mailing Address 4012 W Wendover Ave

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Food/Beverage

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2016

Amount of Each Disbursement this Period

149.34

☐ Memo Item

Transaction ID : SB17.13072

B. Da Vinci's Table

Mailing Address 2260 S. Church Street

City	State	Zip Code
Burlington	NY	27215

Purpose of Disbursement
Food/Beverage

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Disbursement this Period

323.01

☐ Memo Item

Transaction ID : SB17.12967

c. Delta Air Lines Inc.

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement
Airfare

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 10 / 2016

Amount of Each Disbursement this Period

300.60

☐ Memo Item

Transaction ID : SB17.13082

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

772.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2016

City	State	Zip Code
ALPHARETTA	GA	30009

Amount of Each Disbursement this Period

15.00

Purpose of Disbursement
Merchant FeesCategory/
Type☐ Memo Item

Transaction ID : SB17.13052

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. Enterprise Rent-A-Car

Mailing Address 3700 W Wendover Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2016

City	State	Zip Code
Greensboro	NC	27407

Amount of Each Disbursement this Period

342.27

Purpose of Disbursement
TransportationCategory/
Type☐ Memo Item

Transaction ID : SB17.13076

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. Zach Farmer

Mailing Address 401 Havenwood Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

City	State	Zip Code
Archdale	NC	27263

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Field SupervisorCategory/
Type☐ Memo Item

Transaction ID : SB17.13067

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

1357.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05		26		2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12980

B. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05		26		2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12981

C. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05		26		2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12982

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

66.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05 / 26 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12984

B. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05 / 26 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12985

C. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05 / 26 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12986

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

66.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12987

B. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.13151

C. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Disbursement this Period

22.25

☐ Memo Item

Transaction ID : SB17.12991

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

66.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05		27		2016

Amount of Each Disbursement this Period

26.75

☐ Memo Item

Transaction ID : SB17.12992

B. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
05		27		2016

Amount of Each Disbursement this Period

26.75

☐ Memo Item

Transaction ID : SB17.12994

C. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Shipping

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
06		06		2016

Amount of Each Disbursement this Period

26.75

☐ Memo Item

Transaction ID : SB17.13055

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

80.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fedex Office Print & Ship Center

Mailing Address 449 Tate St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2016

City	State	Zip Code
Greensboro	NC	27403

Amount of Each Disbursement this Period

Purpose of Disbursement
Shipping

26.75

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.13068

Office Sought:

<input type="checkbox"/> House
<input 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. G-Partnership, LLC

Mailing Address PO Box 4425

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
Greensboro	NC	27404

Amount of Each Disbursement this Period

Purpose of Disbursement
Rent

1118.00

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.12962

Office Sought:

<input type="checkbox"/> House
<input 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. G-Partnership, LLC

Mailing Address PO Box 4425

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2016

City	State	Zip Code
Greensboro	NC	27404

Amount of Each Disbursement this Period

Purpose of Disbursement
Rent

1118.00

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.13097

Office Sought:

<input type="checkbox"/> House
<input 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).....**TOTAL** This Period (last page this line number only).....

2262.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Phil R Graham

Mailing Address 3980 Bittle Rd

City	State	Zip Code
Gibsonville	NC	27249

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
05		23		2016

Amount of Each Disbursement this Period

296.22

☐ Memo Item

Transaction ID : SB17.12964

B. Papa John's

Mailing Address 2924 Battleground Ave

City	State	Zip Code
Greensboro	NC	27408

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
05		23		2016

Amount of Each Disbursement this Period

205.67

☒ Memo Item

Transaction ID : SB17.12964.0

C. Harris Teeter

Mailing Address 3357 Battleground Ave

City	State	Zip Code
Greensboro	NC	27410

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
05		23		2016

Amount of Each Disbursement this Period

90.55

☒ Memo Item

Transaction ID : SB17.12964.1

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

296.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Greensboro Baseball

Mailing Address 408 Bellemeade Street

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Sponsorship

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Disbursement this Period

66.00

☐ Memo Item

Transaction ID : SB17.12952

B. Greensboro Baseball

Mailing Address 408 Bellemeade Street

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Sponsorship

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Disbursement this Period

77.50

☐ Memo Item

Transaction ID : SB17.12954

C. Greensboro Baseball

Mailing Address 408 Bellemeade Street

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Sponsorship

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Disbursement this Period

13.00

☐ Memo Item

Transaction ID : SB17.12955

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

156.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Hampton Inn

Mailing Address 9670 Baltimore Ave

City	State	Zip Code
College Park	MD	20740

Purpose of Disbursement
Lodging

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
06		27		2016

Amount of Each Disbursement this Period

250.75

☐ Memo Item

Transaction ID : SB17.13131

B. Harris Teeter

Mailing Address 3357 Battleground Ave

City	State	Zip Code
Greensboro	NC	27410

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
06		08		2016

Amount of Each Disbursement this Period

9.18

☐ Memo Item

Transaction ID : SB17.13071

c. Hursey's Bar-B-Q

Mailing Address 1834 S Church St

City	State	Zip Code
Burlington	NC	27215

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
06		06		2016

Amount of Each Disbursement this Period

141.90

☐ Memo Item

Transaction ID : SB17.13054

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

401.83

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Hursey's Bar-B-Q

Mailing Address 1834 S Church St

City	State	Zip Code
Burlington	NC	27215

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
06		29		2016

Amount of Each Disbursement this Period

420.01

☐ Memo Item

Transaction ID : SB17.13135

B. Lucky 32

Mailing Address 1421 Westover Terrace

City	State	Zip Code
Greensboro	NC	27408

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
06		30		2016

Amount of Each Disbursement this Period

71.52

☐ Memo Item

Transaction ID : SB17.13140

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
05		20		2016

Amount of Each Disbursement this Period

332.49

☐ Memo Item

Transaction ID : SB17.12937

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

420.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
05		20		2016

Amount of Each Disbursement this Period

98.28

☐ Memo Item

Transaction ID : SB17.12938

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
05		23		2016

Amount of Each Disbursement this Period

57.59

☐ Memo Item

Transaction ID : SB17.12939

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
05		25		2016

Amount of Each Disbursement this Period

27.62

☐ Memo Item

Transaction ID : SB17.12971

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

183.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
05		31		2016

Amount of Each Disbursement this Period

16.99

☐ Memo Item

Transaction ID : SB17.13146

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
06		02		2016

Amount of Each Disbursement this Period

63.82

☐ Memo Item

Transaction ID : SB17.13046

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

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
06		06		2016

Amount of Each Disbursement this Period

32.01

☐ Memo Item

Transaction ID : SB17.13057

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

112.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. One Source Document Solutions

Mailing Address 311-D Pomona Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2016

City	State	Zip Code
Greensbro	NC	27407

Amount of Each Disbursement this Period

4481.21

Purpose of Disbursement
Printing ServicesCategory/
Type☐ Memo Item

Transaction ID : SB17.13050

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. Davis Pace

Mailing Address 1741 A Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2016

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Campaign ManagementCategory/
Type☐ Memo Item

Transaction ID : SB17.12990

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. Davis Pace

Mailing Address 1741 A Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2016

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

351.00

Purpose of Disbursement
MileageCategory/
Type☐ Memo Item

Transaction ID : SB17.13105

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).....

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

7832.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Proximity Hotel

Mailing Address 704 Green Valley Road

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Event Site Fee, 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
06		10		2016

Amount of Each Disbursement this Period

1520.97

☐ Memo Item

Transaction ID : SB17.13083

B. Remington Research Group

Mailing Address 1420 NW Vivion Road

City	State	Zip Code
Kansas City	MO	64118

Purpose of Disbursement
Polling

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
06		14		2016

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB17.13098

c. Rody's Tavern

Mailing Address 5105 Michaux Road

City	State	Zip Code
Greensboro	NC	27410

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
06		01		2016

Amount of Each Disbursement this Period

80.73

☐ Memo Item

Transaction ID : SB17.13042

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

3601.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Katie Sessoms

Mailing Address 6507 Horseman Trl

City	State	Zip Code
Summerfield	NC	27358

Purpose of Disbursement
Management 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
06		02		2016

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Transaction ID : SB17.13049

B. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

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
06		07		2016

Amount of Each Disbursement this Period

40.10

☐ Memo Item

Transaction ID : SB17.13059

c. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

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
06		07		2016

Amount of Each Disbursement this Period

13.01

☐ Memo Item

Transaction ID : SB17.13060

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

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

2553.11

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 68

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

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
06		13		2016

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Transaction ID : SB17.13085

B. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

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
06		28		2016

Amount of Each Disbursement this Period

34.66

☐ Memo Item

Transaction ID : SB17.13132

c. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

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
06		30		2016

Amount of Each Disbursement this Period

35.10

☐ Memo Item

Transaction ID : SB17.13143

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

109.76

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sheraton Hotel

Mailing Address 3121 Gate City Blvd

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Lodging

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
05		23		2016

Amount of Each Disbursement this Period

205.20

☐ Memo Item

Transaction ID : SB17.12942

B. Sirius XM

Mailing Address 1221 Avenue of the Americas

City	State	Zip Code
New York City	NY	10020

Purpose of Disbursement
Service Fee

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
06		14		2016

Amount of Each Disbursement this Period

24.31

☐ Memo Item

Transaction ID : SB17.13094

C. Southwest Airlines

Mailing Address 2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

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
05		23		2016

Amount of Each Disbursement this Period

335.98

☐ Memo Item

Transaction ID : SB17.12947

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

565.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

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
05		27		2016

Amount of Each Disbursement this Period

484.96

☐ Memo Item

Transaction ID : SB17.12993

B. Southwest Airlines

Mailing Address 2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

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
06		13		2016

Amount of Each Disbursement this Period

335.98

☐ Memo Item

Transaction ID : SB17.13092

C. Strategic Media Placement

Mailing Address 7669 Stagers Loop

City	State	Zip Code
Delaware	OH	43015

Purpose of Disbursement
Advertising

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
05		23		2016

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Transaction ID : SB17.12958

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

20820.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 1212 Bridford Pkwy

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Food/Beverage

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 28 / 2016

Amount of Each Disbursement this Period

97.86

☐ Memo Item

Transaction ID : SB17.13133

B. The Cannon Group, LLCMailing Address 1001 Pennsylvania Avenue NW
Suite 1300 N

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Fundraising Consulting

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Disbursement this Period

3761.51

☐ Memo Item

Transaction ID : SB17.13148

c. The Marshall Freehouse

Mailing Address 1211 Battleground Avenue

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2016

Amount of Each Disbursement this Period

200.07

☐ Memo Item

Transaction ID : SB17.13073

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

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

4059.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Time Warner Cable

Mailing Address 200 Centreport Dr

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Phone/Internet Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 06 / 2016

Amount of Each Disbursement this Period

570.69

☐ Memo Item

Transaction ID : SB17.13053

B. Tripps Restaurant

Mailing Address 1337 Winstead Pl

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
06 / 21 / 2016

Amount of Each Disbursement this Period

64.00

☐ Memo Item

Transaction ID : SB17.13115

C. USPS

Mailing Address 2941 Battleground Ave

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Disbursement this Period

28.20

☐ Memo Item

Transaction ID : SB17.12968

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

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

662.89

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 2941 Battleground Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2016

City	State	Zip Code
Greensboro	NC	27408

Amount of Each Disbursement this Period

94.00

Purpose of Disbursement
PostageCategory/
Type☐ Memo Item

Transaction ID : SB17.12978

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. USPS

Mailing Address 2941 Battleground Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2016

City	State	Zip Code
Greensboro	NC	27408

Amount of Each Disbursement this Period

14.10

Purpose of Disbursement
PostageCategory/
Type☐ Memo Item

Transaction ID : SB17.13074

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. USPS

Mailing Address 2941 Battleground Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2016

City	State	Zip Code
Greensboro	NC	27408

Amount of Each Disbursement this Period

14.10

Purpose of Disbursement
PostageCategory/
Type☐ Memo Item

Transaction ID : SB17.13141

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).....

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

122.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Village Tavern

Mailing Address 1903 Westridge Rd

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 29 / 2016

Amount of Each Disbursement this Period

65.00

☐ Memo Item

Transaction ID : SB17.13136

B. Walgreens

Mailing Address 2190 Lawndale Drive

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2016

Amount of Each Disbursement this Period

5.26

☐ Memo Item

Transaction ID : SB17.13142

c. Bradley Mark WalkerMailing Address 2941 Battleground Ave
Box 38334

City	State	Zip Code
Greensboro	NC	27438

Purpose of Disbursement
Food/Beverage, Fuel, Event Fee

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 06

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Disbursement this Period

322.60

☐ Memo Item

Transaction ID : SB17.12963

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

392.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. National Rifle Association of America

Mailing Address 11250 Waples Mill Rd

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement
Event Fee

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
05		23		2016

Amount of Each Disbursement this Period

125.00

☒ Memo Item

Transaction ID : SB17.12963.0

B. Kelsey Williams

Mailing Address 4600 Wending Lane

City	State	Zip Code
Greensboro	NC	27405

Purpose of Disbursement
Field Supervisor

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
06		07		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.13065

C. Josh Woodward

Mailing Address 1158 Double Pond Lane

City	State	Zip Code
High Point	NC	27265

Purpose of Disbursement
Field Supervisor

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
06		07		2016

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Transaction ID : SB17.13064

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

1250.00

104761.18

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

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
06		14		2016

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

Transaction ID : SB21.13103

B. NORTH CAROLINA REPUBLICAN PARTY

Mailing Address 1506 HILLSBOROUGH STREET

City	State	Zip Code
RALEIGH	NC	27605

Purpose of Disbursement
Non-Federal Contribution

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
05		25		2016

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB21.13156

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

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7000.00

7000.00