

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Old North State PAC

ADDRESS (number and street) PO Box 97275 Raleigh NC 27624

2. FEC IDENTIFICATION NUMBER C C00633818 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2022 through 06 / 30 / 2022

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 McMichael, Collin, , ,

Signature of Treasurer McMichael, Collin, , , [Electronically Filed] Date 07 / 15 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Old North State PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		<input type="text" value="27932.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15372.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13853.84"/>	<input type="text" value="15226.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="29226.02"/>	<input type="text" value="43158.87"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23639.80"/>	<input type="text" value="37572.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5586.22"/>	<input type="text" value="5586.22"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

Old North State PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	750.00	750.00
(ii) Unitemized	415.00	415.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1165.00	1165.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6165.00	6165.00
12. Transfers From Affiliated/Other Party Committees.....	7688.84	9061.32
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	13853.84	15226.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13853.84	15226.32

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	639.80	1072.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	639.80	1072.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23639.80	37572.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23639.80	37572.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6165.00	6165.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6165.00	6165.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	639.80	1072.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	639.80	1072.65

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Old North State PAC

A. Fuller, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 Montpelier Ct
 City Raleigh State NC Zip Code 27609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Results Company Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2022
Transaction ID : SA11AI.4469
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Rusher, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 914 Brittlely Way
 City Apex State NC Zip Code 27502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Results Company Occupation (for Individual) Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2022
Transaction ID : SA11AI.4494
 Amount of Each Receipt this Period
 250.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2022

Transaction ID : SA11C.4454

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. BUDD NC VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4801.04

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2022

Transaction ID : SA12.4512

Amount of Each Receipt this Period
4801.04

Memo Item
JFC Transfer

B. Hendrick, Joseph, R, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6000 Monroe Rd Suite 100

City Charlotte	State NC	Zip Code 28212
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Hendrick Auto Group Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2022

Transaction ID : SA12.4512.0

Amount of Each Receipt this Period
5000.00

Memo Item
JFC Attribution

C. Budd Victory
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 97275

City Raleigh	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00638049

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4260.28

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2022

Transaction ID : SA12.4462

Amount of Each Receipt this Period
2887.80

Memo Item
Transfer includes balance fund from previously reported donors

SUBTOTAL of Receipts This Page (optional).....	7688.84
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maloney, William, J, ,

Mailing Address PO Box 339

City Davidson State NC Zip Code 28036

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

Name of Employer (for Individual) 33 Resources Occupation (for Individual) President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 21 / 2022

Transaction ID : SA12.4462.0

Amount of Each Receipt this Period
2500.00

Memo Item
JFC Attribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	7688.84

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Old North State PAC

Full Name (Last, First, Middle Initial) A. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 04 / 03 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4516 Amount of Each Disbursement this Period [] 269.35	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement Accounting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 05 / 19 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4517 Amount of Each Disbursement this Period [] 317.55	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement Accounting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/Type []
Purpose of Disbursement		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 586.90
TOTAL This Period (last page this line number only).....▶	[] 586.90

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Old North State PAC

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

Mailing Address PO BOX 811

City MARION State IA Zip Code 52302

Purpose of Disbursement
Federal Contribution

Candidate Name
ARENHOLZ, ASHLEY HINSON, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼

State: IA District: 02

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: **C00706267**
Transaction ID : **SB23.4549**
Amount of Each Disbursement this Period: 3000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. BO HINES FOR CONGRESS

Mailing Address 1441 E BROAD STREET #214

City FUQUAY VARINA State NC Zip Code 27526

Purpose of Disbursement
Federal Contributions

Candidate Name
HINES, ROBERT, NICHOLAS, ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify)

State: NC District: 13

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: **C00766162**
Transaction ID : **SB23.4541**
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. COMMITTEE TO ELECT CHRISTIAN CASTELLI

Mailing Address PO BOX 1285

City ASHEBORO State NC Zip Code 27204

Purpose of Disbursement
Federal Contribution

Candidate Name
CASTELLI, ROBERT, CHRISTIAN, ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼

State: NC District: 06

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: **C00794495**
Transaction ID : **SB23.4546**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. FRIENDS OF MIKE LEE INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1537

M M M	/	D D D	/	Y Y Y Y Y
06		28		2022

City SALT LAKE CITY State UT Zip Code 84110

FEC Identification Number

Purpose of Disbursement
Federal Contribution

C	C00473827
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Candidate Name
LEE, MIKE, , ,

Category/
Type

Transaction ID : SB23.4519

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: UT District: 00

Amount of Each Disbursement this Period	5000.00
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Memo Item

B. KEAN FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 999

M M M	/	D D D	/	Y Y Y Y Y
06		28		2022

City EDISON State NJ Zip Code 08818

FEC Identification Number

Purpose of Disbursement
Federal Contribution

C	C00703058
---	-----------

Candidate Name
KEAN, THOMAS H JR, , ,

Category/
Type

Transaction ID : SB23.4528

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NJ District: 07

Amount of Each Disbursement this Period	3000.00
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Memo Item

C. MILLER-MEEKS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 33

M M M	/	D D D	/	Y Y Y Y Y
06		29		2022

City OTTUMWA State IA Zip Code 52501

FEC Identification Number

Purpose of Disbursement
Federal Contribution

C	C00558825
---	-----------

Candidate Name
MILLER-MEEKS, MARIANNETTE JANE, , ,

Category/
Type

Transaction ID : SB23.4531

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IA District: 01

Amount of Each Disbursement this Period	3000.00
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Memo Item

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

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

Amount of Each Disbursement this Period	11000.00
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Amount of Each Disbursement this Period	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1159

City OSHKOSH State WI Zip Code 54903

Purpose of Disbursement Federal Contribution

Candidate Name JOHNSON, RON HAROLD MR., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: WI District: 00

Date of Disbursement: 06 / 28 / 2022

FEC Identification Number: C00482984
Transaction ID : SB23.4523
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. SANDY SMITH FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1444 JEFFREYS RD STE 123

City ROCKY MOUNT State NC Zip Code 27804

Purpose of Disbursement Federal Contribution

Candidate Name SMITH, SANDY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: NC District: 01

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: C00697250
Transaction ID : SB23.4534
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. THE PAT HARRIGAN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement Federal Contribution

Candidate Name HARRIGAN, PAT, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: NC District: 14

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: C00802298
Transaction ID : SB23.4542
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7000.00

TOTAL This Period (last page this line number only)..... ▶ 23000.00