

# 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  
Check if different than previously reported. (ACC) Raleigh NC 27624

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00633818 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 09 / 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 M M / D D / Y Y Y Y Y Y 01 / 30 / 2023

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)

Page 2

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"/>		27932.55
(b) Cash on Hand at Beginning of Reporting Period.....	5586.22	
(c) Total Receipts (from Line 19) .....	82969.88	98196.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	88556.10	126128.75
7. Total Disbursements (from Line 31).....	65774.05	103346.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22782.05	22782.05
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	750.00
(ii) Unitemized .....	0.00	415.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	1165.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10000.00	16165.00
12. Transfers From Affiliated/Other Party Committees.....	72869.88	81931.20
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.....	100.00	100.00
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)).....▶	82969.88	98196.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	82969.88	98196.20

**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 .....	774.05	1846.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	774.05	1846.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65000.00	101500.00
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)) ..	65774.05	103346.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65774.05	103346.70

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10000.00	16165.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10000.00	16165.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	774.05	1846.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	774.05	1846.70

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

Form/Schedule: F3XA  
Transaction ID :

Please accept this amendment as the reply to the request for additional information sent on December 12, 2022 to edit a mis-typed designation for the contribution to Team Herschel, Inc. Contribution was originally given as a general election contribution and the receiving committee reported it as a general election contribution. The designation has been updated to match the original designation.

Form/Schedule:  
Transaction ID:

**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 22
<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

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. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 28 / 2022

**Transaction ID : SA11C.4606**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)**

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

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004812

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 22 / 2022

**Transaction ID : SA11C.4604**

Amount of Each Receipt this Period  
5000.00

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

**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 22
<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 ▼  
9335.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2022

**Transaction ID : SA12.4563**

Amount of Each Receipt this Period  
4534.66

Memo Item  
JFC Transfer

**B. Medica, Megan, Salzman, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 26815

City Winston Salem	State NC	Zip Code 27114
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FEC ID number of contributing federal political committee. **C**

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

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
07	/	29	/	2022

**Transaction ID : SA12.4563.0**

Amount of Each Receipt this Period  
5000.00

Memo Item  
JFC Attribution

**C. 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 ▼  
14006.15

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2022

**Transaction ID : SA12.4571**

Amount of Each Receipt this Period  
4670.45

Memo Item  
JFC Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9205.11
<b>TOTAL</b> 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: (check only one)	PAGE 9 OF 22
<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. Spencer, Richard, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5286 E Home Ave  
 City Fresno State CA Zip Code 93727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spencer Enterprises Occupation (for Individual) Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 10 / 2022**  
**Transaction ID : SA12.4571.0**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**B. 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  
 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 ▼ 55995.63

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : SA12.4581**  
 Amount of Each Receipt this Period 41989.48  
 Memo Item  
 JFC Transfer

**C. Klingenstein, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 Broadway #3  
 City New York State NY Zip Code 10018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cohen Klingenstein LLC Occupation (for Individual) Investment Counselor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 20 / 2022**  
**Transaction ID : SA12.4581.0**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41989.48
<b>TOTAL</b> 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: (check only one)	PAGE 10 OF 22
<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. Carroll, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 N Elm St  
 City Greensboro State NC Zip Code 27401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Carroll Companies Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 22 / 2022  
**Transaction ID : SA12.4581.1**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**B. Carroll, Vanessa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 N Elm St  
 City Greensboro State NC Zip Code 27401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 23 / 2022  
**Transaction ID : SA12.4581.2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**C. Hegyi, Albert, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 795 Hulls Farm Rd  
 City Fairfield State CT Zip Code 06890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1st Financial Bank Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2022  
**Transaction ID : SA12.4581.3**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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: (check only one)	PAGE 11 OF 22
<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. Buckley, Walter, W, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11450 Turtle Beach Rd  
 City N Palm Beach State FL Zip Code 33408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 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  
 08 / 25 / 2022  
**Transaction ID : SA12.4581.4**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 JFC Attribution

**B. Buckley, Marjorie, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11450 Turtle Beach Rd  
 City N Palm Beach State FL Zip Code 33408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 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  
 08 / 25 / 2022  
**Transaction ID : SA12.4581.5**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 JFC Attribution

**C. Langone, Elaine, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 Sands Point Rd  
 City Sands Point State NY Zip Code 11050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 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  
 08 / 29 / 2022  
**Transaction ID : SA12.4581.6**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 JFC Attribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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: (check only one)	PAGE 12 OF 22
<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. Langone, Kenneth, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 375 Park Ave  
 City New York State NY Zip Code 10152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Invemed Associates LLC Occupation (for Individual) Businessman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 29 / 2022  
**Transaction ID : SA12.4581.7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**B. Kennelly, Kevin, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2325 Thetford Ct  
 City Charlotte State NC Zip Code 28211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2022  
**Transaction ID : SA12.4581.8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**C. 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  
 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 ▼ 66777.63

Date of Receipt 09 / 19 / 2022  
**Transaction ID : SA12.4574**  
 Amount of Each Receipt this Period 10782.00  
 Memo Item  
 JFC Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10782.00
<b>TOTAL</b> 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: (check only one)	PAGE 13 OF 22
<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. Smith, Eddie, C, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1527  
 City Greenville State NC Zip Code 27835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Grady-White Boats Occupation (for Individual) Owner/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 09 / 02 / 2022  
**Transaction ID : SA12.4574.0**  
 Amount of Each Receipt this Period 2900.00  
 Memo Item  
 JFC Attributions

**B. Childs, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 Sago Palm Rd Ste 701  
 City Vero Beach State FL Zip Code 32963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JW Childs Associates Occupation (for Individual) Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2022  
**Transaction ID : SA12.4574.1**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

**C. Rawl, Julian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 543 Magnolia Creek Dr  
 City Greenville State NC Zip Code 27834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Preston Development Occupation (for Individual) Founder  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 06 / 2022  
**Transaction ID : SA12.4574.2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 JFC Attribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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: (check only one)	PAGE 14 OF 22
<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
-----------------	-------------	-------------------

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 ▼  
67772.74

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2022

**Transaction ID : SA12.4601**

Amount of Each Receipt this Period  
995.11

Memo Item  
JFC TRANSFER

**B. Pitts, Rodney, C, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 E 4th St Ste 100

City Charlotte	State NC	Zip Code 28202
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Southern Elevator Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2022

**Transaction ID : SA12.4601.0**

Amount of Each Receipt this Period  
1000.00

Memo Item  
JFC ATTRIBUTION

**C. 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
-----------------	-------------	-------------------

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 ▼  
77670.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

**Transaction ID : SA12.4615**

Amount of Each Receipt this Period  
9898.18

Memo Item  
JFC Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10893.29
<b>TOTAL</b> 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: (check only one)	PAGE 15 OF 22
<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. Hinman, Roy, H, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Arricola Ave

City St Augustine	State FL	Zip Code 32080
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Island Doctors	Occupation (for Individual) Founder
---	--

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
09	/	28	/	2022

**Transaction ID : SA12.4615.0**

Amount of Each Receipt this Period  
5000.00

Memo Item  
JFC Attribution

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

Mailing Address 1739 Duckcross Cove

City Wichita	State KS	Zip Code 67206
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BEREXCO LLC	Occupation (for Individual) President
--	--

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
09	/	28	/	2022

**Transaction ID : SA12.4615.1**

Amount of Each Receipt this Period  
5000.00

Memo Item  
JFC Attribution

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	72869.88

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

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

FOR LINE NUMBER: PAGE 16 OF 22  
(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  
**KEAN FOR CONGRESS INC**

Mailing Address **PO BOX 999**

City **EDISON** State **NJ** Zip Code **08818**

FEC ID number of contributing federal political committee. **C C00703058**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

Date of Receipt  
**07 / 15 / 2022**

**Transaction ID : SA16.4622**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
 Contribution Refund

**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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>100.00</b>



**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) <b>A. CM&amp;Co, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4666</b> Amount of Each Disbursement this Period [ ] 571.45	
City Raleigh	State NC	Zip Code 27624	Category/Type [ ]
Purpose of Disbursement PAC 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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. CM&amp;Co, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4667</b> Amount of Each Disbursement this Period [ ] 202.60	
City Raleigh	State NC	Zip Code 27624	Category/Type [ ]
Purpose of Disbursement PAC 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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		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) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

[ ] 774.05

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

[ ] 774.05

**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. BRIAN FITZPATRICK FOR ALL OF US**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 939

M M M	/	D D D	/	Y Y Y Y Y
09		29		2022

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

Purpose of Disbursement Contribution

C	C00607416
---	-----------

Candidate Name  
**FITZPATRICK, BRIAN, , ,**

Category/Type

**Transaction ID : SB23.4662**

Amount of Each Disbursement this Period

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

3000.00
---------

Memo Item

**B. BRITT FOR ALABAMA INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3759

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City MONTGOMERY State AL Zip Code 36109

FEC Identification Number

Purpose of Disbursement Contribution

C	C00781443
---	-----------

Candidate Name  
**BRITT, KATIE BOYD, , ,**

Category/Type

**Transaction ID : SB23.4656**

Amount of Each Disbursement this Period

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

5000.00
---------

Memo Item

**C. BRUCE POLIQUIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 524

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City BANGOR State ME Zip Code 04402

FEC Identification Number

Purpose of Disbursement Contribution

C	C00788968
---	-----------

Candidate Name  
**POLIQUIN, BRUCE, , ,**

Category/Type

**Transaction ID : SB23.4651**

Amount of Each Disbursement this Period

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

3000.00
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Memo Item

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

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

11000.00
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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. DOCTOR OZ FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 2771 PHILMONT AVE

City HUNTINGDON VALLEY State PA Zip Code 19006

Purpose of Disbursement Contribution

Candidate Name  
**OZ, MEHMET DR., , ,**

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

Date of Disbursement  
MM / DD / YYYY  
09 / 15 / 2022

FEC Identification Number  
**C** C00795930  
**Transaction ID : SB23.4631**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

**B. FRIENDS OF TODD YOUNG, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3743

City CARMEL State IN Zip Code 46082

Purpose of Disbursement Contribution

Candidate Name  
**YOUNG, TODD CHRISTOPHER, , ,**

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

Date of Disbursement  
MM / DD / YYYY  
09 / 27 / 2022

FEC Identification Number  
**C** C00459255  
**Transaction ID : SB23.4648**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

**C. JD VANCE FOR SENATE INC.**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6564

City CINCINNATI State OH Zip Code 45206

Purpose of Disbursement Contribution

Candidate Name  
**VANCE, J D, , ,**

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

Date of Disbursement  
MM / DD / YYYY  
09 / 27 / 2022

FEC Identification Number  
**C** C00783142  
**Transaction ID : SB23.4638**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

15000.00

**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) <b>A. KANSANS FOR MARSHALL</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2022
Mailing Address PO BOX 1588		FEC Identification Number C 000576173 <b>Transaction ID : SB23.4629</b>
City GREAT BEND	State KS	Zip Code 67530
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>MARSHALL, ROGER W, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District: 01	

Full Name (Last, First, Middle Initial) <b>B. LAXALT FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2022
Mailing Address PO BOX 751102		FEC Identification Number C 000787135 <b>Transaction ID : SB23.4653</b>
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>LAXALT, ADAM, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NV	District: 00	

Full Name (Last, First, Middle Initial) <b>C. MARCO RUBIO FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2022
Mailing Address 228 S WASHINGTON ST STE 115		FEC Identification Number C 000620518 <b>Transaction ID : SB23.4645</b>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>RUBIO, MARCO, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> 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. MIKE GARCIA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9070 IRVINE CENTER DRIVE #150

M M M	/	D D D	/	Y Y Y Y Y
09		29		2022

City IRVINE State CA Zip Code 92618

FEC Identification Number

Purpose of Disbursement Contribution

C	C00701102
---	-----------

Candidate Name  
**GARCIA, MICHAEL, , ,**

Category/Type

**Transaction ID : SB23.4659**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: CA District: 27

5000.00
---------

Memo Item

**B. TEAM HERSCHEL, INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 501707

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City ATLANTA State GA Zip Code 31150

FEC Identification Number

Purpose of Disbursement Contribution

C	C00787853
---	-----------

Candidate Name  
**WALKER, HERSCHEL MR., , ,**

Category/Type

**Transaction ID : SB23.4637**

Amount of Each Disbursement this Period

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

5000.00
---------

Memo Item

**C. THE PAT HARRIGAN COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 97275

M M M	/	D D D	/	Y Y Y Y Y
08		15		2022

City RALEIGH State NC Zip Code 27624

FEC Identification Number

Purpose of Disbursement Contribution

C	C00802298
---	-----------

Candidate Name  
**HARRIGAN, PAT, , ,**

Category/Type

**Transaction ID : SB23.4623**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NC District: 14

4000.00
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Memo Item

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

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

14000.00
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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**

Full Name (Last, First, Middle Initial)  
**A. TIM SCOTT FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

Mailing Address 1405 ASHLEY RIVER RD

FEC Identification Number

**C** C00540302

**Transaction ID : SB23.4641**

Amount of Each Disbursement this Period

5000.00

Memo Item

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**SCOTT, TIMOTHY, , ,**

Office Sought:  House  
 Senate  
 President  
State: SC District: 01

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)  
**B. ZINKE FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2022

Mailing Address PO BOX 1597

FEC Identification Number

**C** C00778159

**Transaction ID : SB23.4625**

Amount of Each Disbursement this Period

5000.00

Memo Item

City HELENA State MT Zip Code 59624

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**ZINKE, RYAN, K, ,**

Office Sought:  House  
 Senate  
 President  
State: MT District: 01

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

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

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

10000.00

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

65000.00