PAGE 1 / 15

Image# 14960866260

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	or An Authorize		•		Office Use Only
NAME OF TYPE (     COMMITTEE (in full)	OR PRINT ▼	Example: over the I	If typing, type nes.	12FE4M	
JAMES MITCHELL FOR CO	NGRESS				1
ADDRESS (number and street)	DAVIS LAKE PARK	VAY SUITE C1			
ADDITIESS (number and street)					
Check if different than previously reported. (ACC)	RLOTTE			NC	28269
2. FEC IDENTIFICATION NUMBER		ITY A		STATE	ZIP CODE A STATE ▼ DISTRICT
C C00557991	3. IS <sup>-</sup> REI	THIS X	NEW (N) <b>OR</b>	AMENI (A)	DED NC 12
	1				
4. TYPE OF REPORT (Choose Or	(b) 12-E	Day <b>PRE</b> -Election	n Report for the:		
(a) Quarterly Reports:		X Prima	ry (12P)	General (	12G) Runoff (12R)
April 15 Quarterly Report (0	21)		ention (12C)	Special (1	(20)
July 15 Quarterly Report (C	(2)	Conve	ention (126)	Special (	123)
October 15 Quarterly Repo	rt (Q3) Elec	etion on	05 06 /	2014	in the NC State of
January 31 Year-End Report	t (YE) (c) 30-E	Day <b>POST</b> -Elect	ion Report for the:	:	
		Gener	al (30G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Elec	etion on	M / D D /	Y Y Y Y	in the State of
5. Covering Period 04 /	01 / Y Y 2014		rough 04	/ 16	Y Y Y Y Y 2014
I certify that I have examined this Repo	rt and to the best	of my knowledg	e and belief it is t	rue, correct an	d complete.
Type or Print Name of Treasurer JAM	IES MITCHELL				
Signature of Treasurer JAMES MITC	THELL	[Electro	nically Filed]	Date 04	/ D D / Y Y Y Y Y 2014
NOTE: Submission of false, erroneous, or	incomplete informat	ion may subject	the person signing	this Report to t	the penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 15

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

#### JAMES MITCHELL FOR CONGRESS

R	eport	Covering the Period: From:	04 / 01 / Y Y Y Y Y TO:	04 / 16 / Y 2014
			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))	4250.00	32412.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4250.00	32412.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	11770.73	23318.23
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	11770.73	23318.23
8.		h on Hand at Close of orting Period (from Line 27)	9093.77	
9.	the	ts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed <b>BY</b> Committee (Itemize all on edule C and/or Schedule D)	40382.13	

#### 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 PAGE 3 / 15 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

### JAMES MITCHELL FOR CONGRESS

04 01 2014 04 16 2014 Report Covering the Period: From: To:

I. RECEIPTS		I. RECEIPTS  COLUMN A Total This Period	
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	4250.00	27875.00
	(ii) Unitemized	0.00	4287.00
	(iii) TOTAL of contributions from individuals	4250.00	32162.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	250.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	4250.00	32412.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	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
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	4250.00	32412.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	11770.73	23318.23
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	11770.73	23318.23
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	16614.50
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	4250.00
5.	SUBTOTAL (add Line 23 and Line 24)		20864.50
	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	11770.73
6.			

# SCHEDULE A (FEC Form 3)

15 FOR LINE NUMBER: PAGE 5 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 11d 12 13a 13b 14

**ITEMIZED RECEIPTS** Detailed Summary Page 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) JAMES MITCHELL FOR CONGRESS Full Name (Last, First, Middle Initial) **Bridget Chisholm** Date of Receipt Mailing Address P.O.Box 5183 04 10 2014 City State Zip Code Transaction ID: SA11AI.4338 NC 27435 Greensboro FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **BWC Consulting** Owner

Receipt For: 2014  Primary General Other (specify)	Election Cycle-to-Date 250.00	
B. Full Name (Last, First, Middle Initial) Roddey Dowd Jr.  Mailing Address PO Box 35430  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charlotte	NC 28235	Transaction ID : SA11AI.4332
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	1000.00
Charlotte Pipe and Foundry	President	
Receipt For: 2014  Primary General  Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)  Roddey Dowd Sr.  Mailing Address P.O. Box 35430		Date of Receipt
		04 10 2014
City Charlotte	State Zip Code NC 28235	Transaction ID : SA11AI.4334
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	1000.00
Charlotte Pipe and Foundry	Director	
Receipt For: 2014  Primary General  Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).		2250.00
TOTAL This Period (last page this line numb	er only)	, , , , , , , , , , , , , , , , , , , ,
		FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LI	NE NU	MBER:	PAGE	6	OF	15
(check	only or	ne)				
X 11	а	11b	11c	11	d	
12	.	13a	13b	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) JAMES MITCHELL FOR CONGRESS Full Name (Last, First, Middle Initial) **Edward Hardison** Date of Receipt Mailing Address 1300 Scotland Ave 2014 10 City State Zip Code Transaction ID: SA11AI.4336 NC 28297 Charlotte FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Charlotte Pipe and Foundry President Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) George Rohe Date of Receipt Mailing Address 4101 Black Sycamore Drive 10 2014 Citv State Zip Code Transaction ID: SA11AI.4340 Charlotte NC 28226 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation President Chamber of Commerce Receipt For: 2014 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Kimberly Seagle Date of Receipt Mailing Address 6021 Connermara CT 2014 09 City State Zip Code Transaction ID: SA11AI.4342 NC Charlotte 28037 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 500.00 2000.00 SUBTOTAL of Receipts This Page (optional)..... 4250.00 TOTAL This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE N	PAGE	7	OF	15		
Use separate schedule(s)	(check only						
for each category of the Detailed Summary Page	X 1	17	18		19a		191
Detailed Guillinary 1 age	2	20a	20b		20c		21
y not be sold or used by any person for the nurnose of soliciting contributions							

	Detailed \$	Summary	/ Page	20a 20b 20c 21				
	ly information copied from such Reports and Statements may not be so for commercial purposes, other than using the name and address of							
$\rangle$	NAME OF COMMITTEE (In Full)  JAMES MITCHELL FOR CONGRESS							
	Full Name (Last, First, Middle Initial)							
۹.	Travis Commodore			Date of Disbursement				
	Mailing Address			04 01 2014				
	City State Zip Co	ode		Amount of Each Disbursement this Period				
	Purpose of Disbursement Salary			4000.00 Transaction ID : SB17.4371				
	JAMES MITCHELL FOR CONGRESS		Category/ Type					
	Office Sought:    House   Disbursement For: 2014     Senate   Primary   G   Other (specify)     State: NC   District: 12	eneral						
3.	Full Name (Last, First, Middle Initial)  Travis Commodore			Date of Disbursement				
	Mailing Address			04 01 2014				
	City State Zip Co	ode		Amount of Each Disbursement this Period				
	Purpose of Disbursement Reimbursements			1145.67 Transaction ID : SB17.4372				
	JAMES MITCHELL FOR CONGRESS		Category/ Type					
	Office Sought:    X   House   Disbursement For: 2014	ieneral						
_	Full Name (Last, First, Middle Initial)  Doryaun Cook			Date of Disbursement				
Ĵ.	Mailing Address			04 / D D / Y Y Y Y Y Y O4 04 2014				
	City State Zip Code			Amount of Each Disbursement this Period				
	Purpose of Disbursement Salary		· · · ·	1700.00				
	Candidate Name JAMES MITCHELL FOR CONGRESS		Category/ Type	Transaction ID : SB17.4374				
	Office Sought:    House   Disbursement For: 2014	ieneral						
s	UBTOTAL of Disbursements This Page (optional)			6845.67				
Т	OTAL This Period (last page this line number only)							

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

**PAGE** 8 15 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) JAMES MITCHELL FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Jill Santuccio 2014 Mailing Address 04 01 City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 2250.00 Salary Transaction ID: SB17.4373 Candidate Name Category/ JAMES MITCHELL FOR CONGRESS Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President NC State: District: Full Name (Last, First, Middle Initial) Joseph Smalls Date of Disbursement Mailing Address 1440 S St NW 04 80 2014 Apt 2 City State Zip Code Amount of Each Disbursement this Period DC 20009 Washington 1500.00 Purpose of Disbursement Salary Transaction ID: SB17.4375 Candidate Name Category/ JAMES MITCHELL FOR CONGRESS Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: NC District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Joseph Smalls Mailing Address 1440 S St NW 04 2014 City State Zip Code Amount of Each Disbursement this Period 20009 Washington DC 892.56 Purpose of Disbursement Reimbursements Transaction ID : SB17.4376 Candidate Name Category/ JAMES MITCHELL FOR CONGRESS Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) 2014 NC State: District: 12 4642.56 SUBTOTAL of Disbursements This Page (optional).....

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

### SCHEDULE B (FEC Form 3)

**PAGE** 9 15 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JAMES MITCHELL FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Vistec Graphics 2014 Mailing Address 701 Morris St 10 City State Zip Code Amount of Each Disbursement this Period NC Charlotte 28202 Purpose of Disbursement 232.50 Printing services Transaction ID: SB17.4378 Candidate Name Category/ JAMES MITCHELL FOR CONGRESS Type Office Sought: Disbursement For: 2014 House Senate Primary General Other (specify) President NC State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 232.50 SUBTOTAL of Disbursements This Page (optional).....

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

11720.73

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 10 OF
FOR LINE NUMBER:
(check only one)

IMBER:		
ne)		9
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15

NAME OF COMMITTEE (In Full)		
JAMES MITCHELL	<b>FOR</b>	<b>CONGRESS</b>

A F. H. Nie and W. and First Advisite Letters of Build			Nature of Debt (Purpose):
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		PR Services
Carolina PR			
Mailing Address 111			
Mailing Address 1017 E. Morehead Steet			
Ste 150 City State	Zip Code		
Charlotte	NC NC	28204	
Chanotte	INC	20204	
Outstanding Balance Beginning This Period			Transaction ID : SD10.4322
2563.00			
9 9			
Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
0.00		0.00	2563.00
0.00		0.00	2000.00
B. Full Name (Last, First, Middle Initial) of Debto	r or Craditor		Nature of Debt (Purpose):
	or or creditor		PR Services
Carolina PR			TIX CONTIGOR
Mailing Address			
Mailing Address 1017 E. Morehead Steet			
Ste 150 City State	Zip Code		
Charlotte	NC	28204	
Charlotte			
Outstanding Balance Beginning This Period			Transaction ID : SD10.4347
0.00			
0.00			
Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
5100.09		0.00	5100.09
0100.00	7	7	
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of Debt (Purpose):
Lisa Crawford	or or orcanor		Reimbursements
Lisa Ciawioid			
Mailing Address			
Ivialing Address			
City	State	Zip Code	
		p	
			Transaction ID : SD10.4361
Outstanding Balance Beginning This Period			17ansaction ID : 3D10.4361
0.00			
A THE DOLL	5		
Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
300.00		0.00	300.00
7 7	7	7	7 7 7
SUBTOTALS This Period This Page (optional)			7963.09
1) SOBTOTALS This relied this rage (optional)			
2) TOTALS This Period (last page this line numbe	r only)		·
-, IOIALO IIIIS I enou (last page tilis lille fluttibe	· • • • • • • • • • • • • • • • • • • •		
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only	Λ	0.00
, TOTAL OUTSTANDING LOANS HOLD SCHEDULE	C (last page off)		
() ADD 2) and 2) and corn, farward to answerict	o line of Summer	/ Page (last page anti-)	0.00
ADD 2) and 3) and carry forward to appropriate	e iirie oi Summar	y rage (last page only)	

**Excluding Loans** 

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

PAGE 11 OF FOR (chec

LINE NUMBER:		1
k only one)		9
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15

	ME OF COMMITTEE (In Full)  AMES MITCHELL FO	R COI	NGRESS	•		
_	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  DreamLife				Nature of Debt (Purpose): Balance of Salary	
	Mailing Address					
	City State					
	Outstanding Balance Beginning This Period	Transaction ID : SD10.4360				
	0.00					
	Amount Incurred This Period	Pa	yment This Period		Outstanding Balance at Close of This Period	
	4100.00		7	0.00	4100.00	
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			Nature of Debt (Purpose):	
	Duke Energy				Energy bill for the office	
Ī	Mailing Address 526 S Church St					
Ī	City State Charlotte	Zip Code NC	28202			
ŀ	Outstanding Balance Beginning This Period				Transaction ID : SD10.4357	
	0.00					
	Amount Incurred This Period Payment This Period				Outstanding Balance at Close of This Period	
	98.40	7	(	0.00	98.40	
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  iPromoteU				Nature of Debt (Purpose): Stickers for the campaign	
	Mailing Address 321 Commonwealth Road					
ł	Suite 101 City	State	Zip Code			
	Wayland	MD	01778			
	Outstanding Balance Beginning This Period				Transaction ID : SD10.4369	
	0.00					
	Amount Incurred This Period	Pa	yment This Period		Outstanding Balance at Close of This Period	
	696.35	7	7	0.00	696.35	
1)	SUBTOTALS This Period This Page (optional)			<b>&gt;</b>	4894.75	
2)	TOTALS This Period (last page this line number	only)		<b>&gt;</b>		
3)	TOTAL OUTSTANDING LOANS from Schedule (	C (last page c	only)	<b>&gt;</b>	0.00	
4)	ADD 2) and 3) and carry forward to appropriate	line of Summ	ary Page (last page o	only) ►	0.00	

**Excluding Loans** 

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

PAGE 12 OF FOF (che

R LINE NUMBER:		
eck only one)		9
	$\overline{\mathbf{v}}$	10

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NAME OF COMMITTEE (In Full) JAMES MITCHELL FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Photography Services John Strayhorn Photography Mailing Address 740 E 5th St City Zip Code NC 28202 Charlotte Transaction ID: SD10.4349 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 350.00 350.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website Services Marketabilities Mailing Address 4411 Atleigh Court City Zip Code State Charlotte NC 28226 Outstanding Balance Beginning This Period Transaction ID: SD10.4351 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1467.38 1467.38 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Fundraising director services Mellinger Group Mailing Address 1200 Light St Unit B City State Zip Code MD Annapolis 21230 Transaction ID: SD10.4362 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 4500.00 0.004500.00 6317.38 1) SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page this line number only)..... 0.00 TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 0.00 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

15

NAME OF COMMITTEE (In Full)

J	Α	MES	3 M	IT(	CHE	ELL	FOR	CO	NGR	RESS
	Λ	Full Name	. /l .oo+	Livet	Middle	Initial)	of Dobtor or	Craditar		

F	A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
	Mellinger Group		Travel Reimbursement for Fundraising Director	
	Monniger Group			
N	Mailing Address 1200 Light St			
	Unit B			
	Dity State	Zip Code		
- [.	Annapolis	MD 21230		
F			Transaction ID : SD10.4364	
	Outstanding Balance Beginning This Period	Transaction ib . 3D10.4304		
	0.00			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	2342.00	0.00	2342.00	
		7 7 7		
-	3. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):	
'		or orealtor	Signs for campaign office	
	Peidmont Marketing Concepts		- Company and a second	
-	Mailing Address 801 Atando Ave		_	
- [ '	- 001 / ttalido / tvo			
	Suite J  City State	Zip Code	_	
	Charlotte	NC 28206		
F	Chanotte	110 20200		
	Outstanding Balance Beginning This Period		Transaction ID : SD10.4367	
	0.00			
	0.00			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
			194.76	
	194.76	0.00	194.76	
$\vdash$				
10	C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose):	
	Piedmont Natural Gas	Gas for the office		
L				
N	Mailing Address 4339 S Tyron St			
L				
	Dity	State Zip Code		
L	Charlotte	NC 28217		
	Outstanding Balance Beginning This Period		Transaction ID : SD10.4355	
	0.00			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	Amount incured mis renod		Outstanding Balance at Glose of This Feriod	
	135.56	0.00	135.56	
		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
4\	SUBTOTALS This Period This Page (optional)	•	. 2672.32	
')	SOBIOTALS This Feriod This Fage (optional)			
٥)	TOTALS This Deviced (last nego this line number			
2)	TOTALS This Period (last page this line number	7		
ο,	TOTAL OUTOTANDING LOANS (	0.00		
3)	TOTAL OUTSTANDING LOANS from Schedule 0	c (last page only)		
			0.00	
41	ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

15

NAME OF COMMITTEE (In Full)

JAMES MITCHELL FOR CONGRESS

	IN OCHUCINEOU	
A. Full Name (Last, First, Middle Initial) of Debtor Jill Santuccio	or Creditor	Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
Outstanding Balance Beginning This Period 4500.00		Transaction ID : SD10.4314
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	4500.00
B. Full Name (Last, First, Middle Initial) of Debtor Signs Now	or Creditor	Nature of Debt (Purpose): Campaign Signs
Mailing Address 1310 South Church		
City State Charlotte	Zip Code NC 28203	
Outstanding Balance Beginning This Period  0.00  Amount Incurred This Period	Payment This Period	Transaction ID: SD10.4344  Outstanding Balance at Close of This Period
215.21	0.00	215.21
C. Full Name (Last, First, Middle Initial) of Debtor Joseph Smalls	or Creditor	Nature of Debt (Purpose): Salary owed
Mailing Address 1440 S St NW Apt 2		
City Washington	State Zip Code DC 20009	
Outstanding Balance Beginning This Period  0.00		Transaction ID: SD10.4359
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
6683.00	0.00	6683.00
) SUBTOTALS This Period This Page (optional)		11398.21
c) TOTALS This Period (last page this line number of	only)	
) TOTAL OUTSTANDING LOANS from Schedule C	C (last page only)	0.00
) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	0.00

**Excluding Loans** 

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

PAGE 15 OF FOR LINE NU (check only o

UMBER:		
one)		9
	X	10

15

NAME OF COMMITTEE (In Full)

J	AMES MITCHELL FO	R CON	GRESS	3			
	A. Full Name (Last, First, Middle Initial) of Debtor The Strategy Group	Nature of Debt (Purpose): Media Messaging Services					
	Mailing Address 1140 Connecticutt Ave NW 8th Floor				-		
	City State Washington	Zip Code DC	20036				
	Outstanding Balance Beginning This Period 0.00				Transaction ID : SD10.4365		
	Amount Incurred This Period	Paym	ent This Period		Outstanding Balance at Close of This Period		
	6600.00		7	0.00	6600.00		
	B. Full Name (Last, First, Middle Initial) of Debtor Time Warner Cable	or Creditor			Nature of Debt (Purpose): Telephone, Cable, Internet for the office		
ŀ	Mailing Address 13840 Ballantyne Corporate Place	e					
	City State Charlotte	Zip Code NC	28277				
	Outstanding Balance Beginning This Period  0.00  Amount Incurred This Period  536.38	Paym	ent This Period	0.00	Transaction ID: SD10.4353  Outstanding Balance at Close of This Period 536.38		
•	C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			Nature of Debt (Purpose):		
	Mailing Address						
	City	State	Zip Code				
Ī	Outstanding Balance Beginning This Period						
	Amount Incurred This Period	Paym	ent This Period		Outstanding Balance at Close of This Period		
		, , , , , , ,	, , , , , , ,				
1)	SUBTOTALS This Period This Page (optional)			<b>&gt;</b>	7136.38		
2)	TOTALS This Period (last page this line number of	only)		<b>&gt;</b>	40382.13		
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page only	/)	<b>&gt;</b>	0.00		
4)	ADD 2) and 3) and carry forward to appropriate	line of Summar	/ Page (last page	e only)	40382.13		