

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARMPAQ

ADDRESS (number and street)

5301 GLENWOOD AVENUE

Check if different than previously reported. (ACC)

RALEIGH

NC

27612

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00216754

3. IS THIS REPORT

x

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 Quarterly Report(YE)

x 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

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01

01

2005

through

06

30

2005

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 H. Julian Philpott, Jr.

Signature of Treasurer Electronically Filed by H. Julian Philpott, Jr.

Date

07

19

2005

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

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Report Covering the Period: From: <sup>M</sup>01 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2005

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2005		13864.01
(b) Cash on Hand at Beginning of Reporting Period .....	13864.01	
(c) Total Receipts (from Line 19) .....	34854.04	34854.04
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	48718.05	48718.05
<hr/>		
7. Total Disbursements (from Line 31) .....	25583.55	25583.55
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	23134.50	23134.50
<hr/>		
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Report Covering the Period: From: <sup>M</sup>01 <sup>-</sup>01 <sup>-</sup>2005 To: <sup>M</sup>06 <sup>-</sup>30 <sup>-</sup>2005

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) .....	13492.00	13492.00
(ii) Unitemized .....	21352.00	21352.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	34844.00	34844.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	34844.00	34844.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
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.) .....	10.04	10.04
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 Transfer (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)) .....	34854.04	34854.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	34854.04	34854.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	25500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	83.55	83.55
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 ActMty (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))..	25583.55	25583.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	25583.55	25583.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	34844.00	34844.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34844.00	34844.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 24

(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Kathy Brewer</b>		Date of Receipt M / D / Y 04 / 14 / 2005
Mailing Address 5815 Phillipi Church Rd		Transaction ID: SA11A1.4404
City Raeeford	State NC	Zip Code 28376
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Keith Cable</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address PO Box 6935		Transaction ID: SA11A1.4374
City Asheville	State NC	Zip Code 28816
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Lenard Cox</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address PO Box 6935		Transaction ID: SA11A1.4377
City Asheville	State NC	Zip Code 28816
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1200.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Beth Crawford</b>		Date of Receipt M / D / Y 03 / 17 / 2005
Mailing Address 248 Snow Hill Lane		Transaction ID: SA11A1.4354
City Elk Park	State NC	Zip Code 28622
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Bryan Creak</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address 300 Livingston Dr		Transaction ID: SA11A1.4375
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer NCFB Mutual Insurance Com- pany	Occupation Claims Manager	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Peter Dental</b>		Date of Receipt M / D / Y 08 / 01 / 2005
Mailing Address 15 Furches St		Transaction ID: SA11A1.4424
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1350.00
Name of Employer NC Farm Bureau Federation	Occupation Administrator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2150.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Christopher Deserte Jr.</b>		Date of Receipt M / D / Y 03 / 23 / 2005
Mailing Address 281 Little Cohaire Ln		Transaction ID: SA11A1.4364
City	State	Zip Code
Roseboro	NC	28382
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Jason Falls</b>		Date of Receipt M / D / Y 04 / 14 / 2005
Mailing Address PO Box 129		Transaction ID: SA11A1.4406
City	State	Zip Code
Kings Mountain	NC	28086
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Fuller, Jr.</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address 3940 High Rock Road		Transaction ID: SA11A1.4391
City	State	Zip Code
Gibsonville	NC	27249
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 800.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>1600.00</b>
TOTAL This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 9 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
			17

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Terry Gilmore</b>		Date of Receipt M / D / Y 04 / 05 / 2005
Mailing Address Po Box 2008		Transaction ID: SA11A1.4401
City Asheboro	State NC	Zip Code 27204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Hugh House</b>		Date of Receipt M / D / Y 03 / 17 / 2005
Mailing Address 863 Par Drive		Transaction ID: SA11A1.4353
City Jacksonville	State NC	Zip Code 28540
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. John Kirby</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 184 Neighborly Drive		Transaction ID: SA11A1.4420
City Lake Lure	State NC	Zip Code 28748
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1300.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Bill King</b>		Date of Receipt M / D / Y 04 / 10 / 2005
Mailing Address 201 Foxcroft Lane		Transaction ID: SA11A1.4413
City Winterville	State NC	Zip Code 28590
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. David Kimbra</b>		Date of Receipt M / D / Y 04 / 04 / 2005
Mailing Address 5739 Willow Road		Transaction ID: SA11A1.4396
City Hendersonville	State NC	Zip Code 28739
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 442.00
Name of Employer NC Farm Bureau Service Company	Occupation Apple Sales Desk	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.00	

Full Name (Last, First, Middle Initial) <b>C. Mareu Matice</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address PO Box 456		Transaction ID: SA11A1.4386
City N Wilkesboro	State NC	Zip Code 28659
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>1142.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Robert McCracken</b>		Date of Receipt M / D / Y Y Y Y 03 / 18 / 2005
Mailing Address PD Box 1945		Transaction ID: SA11A1.4381
City	State	Zip Code
Reidsville	NC	27320
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Dwayne Nykamp, Jr.</b>		Date of Receipt M / D / Y Y Y Y 03 / 31 / 2005
Mailing Address PD Box 1500		Transaction ID: SA11A1.4384
City	State	Zip Code
Henderson	NC	27526
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. John Pennington</b>		Date of Receipt M / D / Y Y Y Y 03 / 31 / 2005
Mailing Address PD Box 906		Transaction ID: SA11A1.4379
City	State	Zip Code
Graham	NC	27253
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1200.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 12 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ricky Poindexter Mailing Address 3013 Raven Hill Drive City East River State NC Zip Code 27018 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M / D / Y Y Y Y Y 05 / 03 / 2005 Transaction ID: SA11A1.4417 Amount of Each Receipt this Period 300.00 Contribution
Name of Employer Self Receipt For: Primary General Other (specify) ▼	Occupation Insurance Sales Aggregate Year-to-Date ▼ 300.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ricky Sandy Mailing Address PO Box 418 City Raeford State NC Zip Code 28376 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M / D / Y Y Y Y Y 04 / 14 / 2005 Transaction ID: SA11A1.4403 Amount of Each Receipt this Period 300.00 Contribution
Name of Employer Self Receipt For: Primary General Other (specify) ▼	Occupation Insurance Sales Aggregate Year-to-Date ▼ 300.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Stoney Sauls Mailing Address 10578 NC 50 North City Angier State NC Zip Code 27501 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M / D / Y Y Y Y Y 03 / 31 / 2005 Transaction ID: SA11A1.4385 Amount of Each Receipt this Period 400.00 Contribution
Name of Employer Self Receipt For: Primary General Other (specify) ▼	Occupation Insurance Sales Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ..... ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) A. Victor Smith, Jr.		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address 185 Post Oak Ln		Transaction ID: SA11A1.4368
City Sanford	State NC	Zip Code 27330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. J.C Stephenson, Jr.		Date of Receipt M / D / Y 03 / 18 / 2005
Mailing Address 281 Cornwallis Drive		Transaction ID: SA11A1.4360
City Mocksville	State NC	Zip Code 27028
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Rebecca Taeter		Date of Receipt M / D / Y 03 / 18 / 2005
Mailing Address 555 London Rd		Transaction ID: SA11A1.4358
City Mooresville	State NC	Zip Code 28115
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1200.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC**

Full Name (Last, First, Middle Initial) <b>A. Brian Toane</b>		Date of Receipt M / D / Y Y Y Y 04 / 14 / 2005
Mailing Address 451 S Roxboro Rd		Transaction ID: SA11A1.4409
City	State	Zip Code
Durham	NC	27704
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>400.00</b>
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Gerald Walters</b>		Date of Receipt M / D / Y Y Y Y 03 / 28 / 2005
Mailing Address 2723 Birch Ln		Transaction ID: SA11A1.4370
City	State	Zip Code
Burlington	NC	27215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>400.00</b>
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Junius Warren</b>		Date of Receipt M / D / Y Y Y Y 03 / 28 / 2005
Mailing Address 308 Maple Street		Transaction ID: SA11A1.4389
City	State	Zip Code
Murfreesboro	NC	27855
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Ronnie Williams</b>		Date of Receipt M / D / Y 03 / 31 / 2005
Mailing Address PD Box 430		Transaction ID: SA11A1.4390
City	State	Zip Code
Carthage	NC	28327
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Terry Williams</b>		Date of Receipt M / D / Y 03 / 17 / 2005
Mailing Address PD Box 1259		Transaction ID: SA11A1.4356
City	State	Zip Code
Beulaville	NC	28518
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Edger Wooten</b>		Date of Receipt M / D / Y 04 / 05 / 2005
Mailing Address 5709 Old Rural Hall Road		Transaction ID: SA11A1.4435
City	State	Zip Code
Winston-Salem	NC	27105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1200.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full) NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC		
Full Name (Last, First, Middle Initial) A. Michael Zigler		Date of Receipt M / D / Y 04 / 14 / 2005
Mailing Address 100B Lissa Anne Lane		Transaction ID: SA11A1.4408
City Winston-Salem	State NC	Zip Code 27104
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>400.00</b>
Name of Employer Self	Occupation Insurance Sales	Contributor
Receipt For: Primary            General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>400.00</b>
TOTAL This Period (last page this line number only) .....	<b>13492.00</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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARMFAC

Full Name (Last, First, Middle Initial) A. Richard Burr		Transaction ID: SB23.4321 Date of Disbursement 03 / 08 / 2005	
Mailing Address PO Box 5928		Amount of Each Disbursement this Period 2500.00	
City Winston-Salem	State NC	Zip Code 27113	011 Category/ Type
Purpose of Disbursement CONTRIBUTION			
Candidate Name Richard Burr			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: NC	District		

Full Name (Last, First, Middle Initial) B. Bob Etheridge		Transaction ID: SB23.4327 Date of Disbursement 04 / 05 / 2005	
Mailing Address PO Box 28001		Amount of Each Disbursement this Period 1000.00	
City Raleigh	State NC	Zip Code 27611-8001	011 Category/ Type
Purpose of Disbursement CONTRIBUTION			
Candidate Name Bob Etheridge			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2005 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: NC	District 2		

Full Name (Last, First, Middle Initial) C. VIRGINIA ANN FDXX		Transaction ID: SB23.4313 Date of Disbursement 01 / 06 / 2005	
Mailing Address 11468 HWY 105		Amount of Each Disbursement this Period 500.00	
City BANNER ELK	State NC	Zip Code 28804	011 Category/ Type
Purpose of Disbursement Contribution			
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: NC	District 05		

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **4000.00**

**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)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARMFAC

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA ANN FOXX</b>		Transaction ID: SB23.4320 Date of Disbursement 03 / 07 / 2005	
Mailing Address 11468 HWY 105		Amount of Each Disbursement this Period 1000.00	
City BANNER ELK State NC Zip Code 28604	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name VIRGINIA ANN FOXX			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NC      District: D5			

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA ANN FOXX</b>		Transaction ID: SB23.4334 Date of Disbursement 06 / 28 / 2005	
Mailing Address 11468 HWY 105		Amount of Each Disbursement this Period 500.00	
City BANNER ELK State NC Zip Code 28604	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name VIRGINIA ANN FOXX			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NC      District: D5			

Full Name (Last, First, Middle Initial) <b>C. Robert Hayes</b>		Transaction ID: SB23.4326 Date of Disbursement 03 / 29 / 2005	
Mailing Address PO Box 2000		Amount of Each Disbursement this Period 1000.00	
City Concord State NC Zip Code 28026	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name Robert Hayes			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NC      District: 8			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2500.00</b>
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARMFAC

Full Name (Last, First, Middle Initial) <b>A. WALTER B JONES</b>		Transaction ID: SB23.4319 Date of Disbursement 02 / 16 / 2005	
Mailing Address 302 HILLCREST DR		Amount of Each Disbursement this Period 500.00	
City FARMVILLE State NC Zip Code 27828	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name		Disbursement For: 2005	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NC      District: D3	

Full Name (Last, First, Middle Initial) <b>B. Mike McIntyre</b>		Transaction ID: SB23.4332 Date of Disbursement 05 / 20 / 2005	
Mailing Address 301 Green Street Room 21B		Amount of Each Disbursement this Period 1000.00	
City Fayetteville State NC Zip Code 28301	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name Mike McIntyre		Disbursement For: 2005	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NC      District: 7	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE CONTRIBUTIONS</b>		Transaction ID: SB23.4322 Date of Disbursement 03 / 14 / 2005	
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 2500.00	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CONTRIBUTION	011 Category/ Type	
Candidate Name		Disbursement For: 2005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:            District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **4000.00**

**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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial)  
**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE CONTRIBUTIONS**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2005  
X Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4333  
Date of Disbursement  
06 / 10 / 2005

Amount of Each Disbursement this Period  
2500.00

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

Mailing Address 2600 South River Road

City Des Plaines State IL Zip Code 60018-3286

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2005  
X Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4329  
Date of Disbursement  
06 / 06 / 2005

Amount of Each Disbursement this Period  
5000.00

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

Mailing Address PO Box 2355

City Asheville State NC Zip Code 28802

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: X House Senate President  
State: NC District 11

Disbursement For: 2004  
Primary X General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4324  
Date of Disbursement  
03 / 16 / 2005

Amount of Each Disbursement this Period  
2000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **9500.00**

**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  
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(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial)  
**A. CHARLES H TAYLOR**

Mailing Address PO Box 2355

City Asheville State NC Zip Code 28802

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHARLES H TAYLOR

Office Sought:  House  Senate  President  
State: NC District 11

Disbursement For: 2005  
 Primary  General  
Other (specify) ▼

Transaction ID: SB23.4328  
Date of Disbursement  
04 / 12 / 2005

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. The Leadership Circle**

Mailing Address 414 Fayetteville Street Mall

City Raleigh State NC Zip Code 27601

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District

Disbursement For: 2005  
 Primary  General  
Other (specify) ▼

Transaction ID: SB23.4317  
Date of Disbursement  
02 / 08 / 2005

Amount of Each Disbursement this Period  
5000.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) .....	▶	5500.00
TOTAL This Period (last page this line number only) .....	▶	25500.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Transaction ID: SB29.4346 Date of Disbursement 01 / 31 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 6.29	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement BANK SERVICE CHARGES	Category/ Type 001	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Transaction ID: SB29.4350 Date of Disbursement 02 / 28 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 6.00	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement BANK SERVICE CHARGE	Category/ Type 001	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Transaction ID: SB29.4431 Date of Disbursement 03 / 31 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 10.00	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Bank Service Charge	Category/ Type 001	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	<b>22.29</b>
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Transaction ID: SB29.4432 Date of Disbursement 04 / 30 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 16.35	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Bank Service Fee	Candidate Name	001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: Primary          General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Transaction ID: SB29.4331 Date of Disbursement 05 / 11 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 10.00	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement 1120 POL FEDERAL INCOME TAXES	Candidate Name	001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: Primary          General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Transaction ID: SB29.4433 Date of Disbursement 05 / 31 / 2005	
Mailing Address PO Box 27961		Amount of Each Disbursement this Period 10.00	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Bank Service Fee	Candidate Name	001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: Primary          General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>45.35</b>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address PO Box 27961

City Raleigh State NC Zip Code 27612

Purpose of Disbursement  
Bank Service Fees

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: SB29.4426

Date of Disbursement

06 / 30 / 2005

Amount of Each Disbursement this Period

15.91

SUBTOTAL of Disbursements This Page (optional) ▶

15.91

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

83.55