

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

JEFF HUNT FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 1001

Check if different than previously reported. (ACC)

BREVARD

NC

28712

2. **FEC IDENTIFICATION NUMBER** ▼

C C00500728

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

NC

11

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Zacheus Harvey Daw III

Signature of Treasurer Zacheus Harvey Daw III

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

JEFF HUNT FOR CONGRESS

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

	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))....	9489.58	99467.58
(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)).....	9489.58	99467.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37075.86	37365.64
(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)).....	37075.86	37365.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	73701.94	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	11600.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JEFF HUNT FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7114.58	91197.58
(ii) Unitemized.....	2375.00	8270.00
(iii) TOTAL of contributions from individuals ▶	9489.58	99467.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9489.58	99467.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	11600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	11600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9489.58	111067.58

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37075.86	37365.64
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
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	37075.86	37365.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	101288.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9489.58
25. SUBTOTAL (add Line 23 and Line 24).....	110777.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37075.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	73701.94

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

Form/Schedule: F3A
Transaction ID :

The Jeff Hunt for Congress Committee (FEC ID# C00500728) is in receipt of your letter dated April 26, 2012, with respect to the 2011 Year-End Report. Please accept this amended report as our response to the FEC's request for additional information. Please know that Jeff Hunt for Congress takes great care to ensure that all reporting requirements are met. If further information is needed, please contact the Jeff Hunt for Congress Committee at (919) 889-1817.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. Locke Bell

Mailing Address P. O. Box 481

City State Zip Code
Gastonia NC 28052

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

Name of Employer Occupation
State of North Carolina District Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2011

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Nathan Brewton

Mailing Address 36 Rolling Lane

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
MathWorks, Inc. Software R&D

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : SA11AI.4817

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce Briggs

Mailing Address P. O. Box 81

City State Zip Code
Mars Hill NC 28754

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ben Campen, Sr.

Mailing Address P. O. Box 458

City Fletcher State NC Zip Code 28732

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

Name of Employer Smiley's Flea Market Occupation Retail Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Larry F. Canady

Mailing Address 36 W. Main St.

City Brevard State NC Zip Code 28712

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

Name of Employer The Proper Pot Occupation Retail Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : SA11AI.4831

Amount of Each Receipt this Period
 364.58

C. Full Name (Last, First, Middle Initial)
Nanette L. Dellamea

Mailing Address 405 Claremont Dr.

City Flat Rock State NC Zip Code 28731

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2011

Transaction ID : SA11AI.4789

Amount of Each Receipt this Period
 250.00

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

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

1114.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gary F. Lowe

Mailing Address 336 Vanderbilt Rd.

City Asheville State NC Zip Code 28803

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

Name of Employer Self-employed Occupation Restaurant owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : SA11AI.4775

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Charles W. McGrady

Mailing Address 195 Fernbrook Way

City Hendersonville State NC Zip Code 28791

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

Name of Employer State of North Carolina Occupation Legislator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2011

Transaction ID : SA11AI.4813

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Ed Morrow

Mailing Address PO Box 1118

City Rosman State NC Zip Code 28772

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

Name of Employer M-B Industries Occupation Manufacturer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2011

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Billie Jean Sheffron

Mailing Address 444 Springbrook Dr.

City Columbus State NC Zip Code 28722

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

Name of Employer N/A Occupation Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2011

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
John H. Sherrill

Mailing Address P. O. Box 815

City Rutherford College State NC Zip Code 28671

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2011

Transaction ID : SA11AI.4793

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
John H. Sherrill

Mailing Address P. O. Box 815

City Rutherford College State NC Zip Code 28671

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : SA11AI.4824

Amount of Each Receipt this Period
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David K. Watkins

Mailing Address 1111 Glen Cannon Dr.

City Pisgah Forest	State NC	Zip Code 28768
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FEC ID number of contributing federal political committee. **C**

Name of Employer Keir Manufacturing, Inc.	Occupation Business Manager
--	--------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2011

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Maureen K. Watkins

Mailing Address 1111 Glen Cannon Dr.

City Pisgah Forest	State NC	Zip Code 28768
-----------------------	-------------	-------------------

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

Name of Employer Keir Manufacturing	Occupation Bookkeeper
--	--------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2011

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Lynn P. Williams

Mailing Address 46 Pine St.

City Brevard	State NC	Zip Code 28712
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2011

Transaction ID : SA11AI.4833

Amount of Each Receipt this Period
2000.00

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

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

2500.00

7114.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blue Ridge Quick Print			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011		
Mailing Address 4 Market Square No. 4104			Amount of Each Disbursement this Period 301.68		
City Brevard	State NC	Zip Code 28712	Transaction ID : SB17.4849		
Purpose of Disbursement Stationary & Campaign Materials		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Blue Ridge Quick Print			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2011		
Mailing Address 4 Market Square No. 4104			Amount of Each Disbursement this Period 112.09		
City Brevard	State NC	Zip Code 28712	Transaction ID : SB17.4851		
Purpose of Disbursement Office Supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Capitol Solutions			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011		
Mailing Address 3351 Ironwood Dr.			Amount of Each Disbursement this Period 14288.00		
City Matthews	State NC	Zip Code 28104	Transaction ID : SB17.4852		
Purpose of Disbursement Management Consulting		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	14701.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 3351 Ironwood Dr.		Amount of Each Disbursement this Period 2350.00 Transaction ID : SB17.4854
City Matthews	State NC	
Zip Code 28104	Purpose of Disbursement Management Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Donehue Direct		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.4859
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Website Design & Servicing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Donehue Direct		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4861
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Website Design & Servicing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Donehue Direct		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4862
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Website Design & Servicing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Donehue Direct		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 3847.76 Transaction ID : SB17.4863
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Advertising and Promotion	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. International Minute Press		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 11100 Monroe Road Suite H		Amount of Each Disbursement this Period 233.68 Transaction ID : SB17.4864
City Matthews	State NC	
Zip Code 28105	Purpose of Disbursement Advertising and Promotion	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6081.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jamestown Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 1270.00 Transaction ID : SB17.4866
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Stationary & Campaign Materials	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jamestown Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 117.00 Transaction ID : SB17.4868
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Postage and Delivery	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jamestown Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 943.55 Transaction ID : SB17.4869
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Travel Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2330.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jamestown Associates		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 1214.92
City Princeton State NJ Zip Code 08540	Category/Type	
Purpose of Disbursement Stationary & Campaign Materials	Candidate Name	Transaction ID : SB17.4870
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Jamestown Associates		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 220.44
City Princeton State NJ Zip Code 08540	Category/Type	
Purpose of Disbursement Postage and Delivery	Candidate Name	Transaction ID : SB17.4871
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. The Appalachian Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address PO Box 17231		Amount of Each Disbursement this Period 1056.25
City Asheville State NC Zip Code 28816	Category/Type	
Purpose of Disbursement Management Consulting	Candidate Name	Transaction ID : SB17.4842
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2491.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Appalachian Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011		
Mailing Address PO Box 17231			Amount of Each Disbursement this Period 1656.00		
City Asheville	State NC	Zip Code 28816	Transaction ID : SB17.4844		
Purpose of Disbursement Management Consulting		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. The Appalachian Company			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011		
Mailing Address PO Box 17231			Amount of Each Disbursement this Period 909.92		
City Asheville	State NC	Zip Code 28816	Transaction ID : SB17.4845		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Verizon			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011		
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 130.41		
City Dallas	State TX	Zip Code 75266-0108	Transaction ID : SB17.4874		
Purpose of Disbursement Telephone Expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	2696.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
JEFF HUNT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 132.62
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone Expense	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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:		

SUBTOTAL of Disbursements This Page (optional).....	132.62
TOTAL This Period (last page this line number only).....	36784.32

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4726**
JEFF HUNT FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) JEFFREY PAUL HUNT	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1001		

City	State	ZIP Code
BREVARD	NC	28712

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11600.00	0.00	11600.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 30 / Y 2011	M M / D D / Y 12/31/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="11600.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="11600.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.