

**FEC
FORM 3X**

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

RECEIVED
2014 NOV -6 AM 9:24
REG MAIL CENTER

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

Conservatives For Guilford County

ADDRESS (number and street) PO Box 38654

Check if different than previously reported. (ACC)

Greensboro NC 27438

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

000566158

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)
	Convention (12C)	Special (12S)	
Election on	M M / D D / Y Y Y Y		in the State of

(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Election on	M M / D D / Y Y Y Y		in the State of

5. Covering Period 07 01 2014 through 10 01 2014

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 Stephen Golimowski

Signature of Treasurer  Date 10 30 2014

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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FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 01 2014 To: ^{M M / D D / Y Y Y Y} 10 01 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^{Y Y Y Y} 2014		3,403.88
(b) Cash on Hand at Beginning of Reporting Period.....	, 967.71	
(c) Total Receipts (from Line 19).....	, 17,240.00	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 18,207.71	
7. Total Disbursements (from Line 31).....	, 16,978.10	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 1,229.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, 0	

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. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 01 2014 To: ^{M M / D D / Y Y Y Y} 10 01 2014

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).....

, 16,800.-

(ii) Unitemized.....

, 440.-

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

, 17,240.-

(b) Political Party Committees.....

, —

(c) Other Political Committees

(such as PACs).....

, —

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

, 17,240.-

12. Transfers From Affiliated/Other Party Committees.....

, —

13. All Loans Received.....

, —

14. Loan Repayments Received.....

, —

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

, —

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

, —

17. Other Federal Receipts

(Dividends, Interest, etc.).....

, —

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

, —

(b) Levin Funds (from Schedule H5).....

, —

(c) Total Transfers (add 18(a) and 18(b))..

, ~~17,240.-~~

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

, 17,240.-

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

, —

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	14,076.89	
(ii) Non-Federal Share.....	2,901.21	
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16,978.10	
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16,978.10	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

1701-11-14-009

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)	, 17,240	, ,
34. Total Contribution Refunds (from Line 28(d))	, <u> </u>	, ,
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 17,240	, ,
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, 14,076.89	, ,
37. Offsets to Operating Expenditures (from Line 15, page 3)	, 2,901.21	, ,
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 16,978.10	, ,

1101-11-11-11

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE / OF	
<input 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	

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)
Conservatives for Guilford County

A. Full Name (Last, First, Middle Initial)
Arias, Maria E

Mailing Address
6733 Idewild St

City
Fort Myers State
FL Zip Code
33946-1225

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) *Run off*

Aggregate Year-to-Date

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Amount of Each Receipt this Period
, 1,000.00

B. Full Name (Last, First, Middle Initial)
Bensley, Lynn

Mailing Address
4800 Sweetbriar Rd

City
Greensboro State
NC Zip Code
27455

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Ganey Nurse Case Manager

Receipt For:
 Primary General
 Other (specify) *Run off*

Aggregate Year-to-Date

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Amount of Each Receipt this Period
, 1,000.-

C. Full Name (Last, First, Middle Initial)
Blasingame, Jean

Mailing Address
102 Castleton Pl

City
James town State
NC Zip Code
27282

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
self Employed

Receipt For:
 Primary General
 Other (specify) *Run off*

Aggregate Year-to-Date

Date of Receipt
M M / D D / Y Y Y Y
07 / 02 / 2014

Amount of Each Receipt this Period
, 100.-

SUBTOTAL of Receipts This Page (optional).....▶ *, 2,200.-*

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE <u>2</u> OF	
<input 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)
Conservatives For Guilford County

Full Name (Last, First, Middle Initial) <u>A. Forsberg, Tina</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 10 2014</u>
Mailing Address <u>2 Hillwind Ct</u>		Amount of Each Receipt this Period <u>, 200.-</u>
City <u>Greensboro</u>	State Zip Code <u>NC 27402</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation <u>Home maker</u>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 	

Full Name (Last, First, Middle Initial) <u>B. Golimowski, Stephen E</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 07 2014</u>
Mailing Address <u>9 Iris Circle</u>		Amount of Each Receipt this Period <u>, 100.-</u>
City <u>Greensboro</u>	State Zip Code <u>NC 27455</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation <u>Retired</u>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ <u>Run off</u>	Aggregate Year-to-Date ▼ 	

Full Name (Last, First, Middle Initial) <u>C. Ham, Nancy</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 10 2014</u>
Mailing Address <u>4 Deerwood Court</u>		Amount of Each Receipt this Period <u>, 200.-</u>
City <u>Greensboro</u>	State Zip Code <u>NC 27410</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation <u>Retired</u>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ <u>Run off</u>	Aggregate Year-to-Date ▼ 	

SUBTOTAL of Receipts This Page (optional).....▶	<u>, 2900.-</u>
TOTAL This Period (last page this line number only).....▶	<u>, , .</u>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>6</u> OF	
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Conservatives For Guilford County

A. Full Name (Last, First, Middle Initial) <u>Wood, Russell</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 02 2014</u>
Mailing Address		Amount of Each Receipt this Period <u>, , 100.-</u>
City	State Zip Code <u>NC</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>, , 100.-</u>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Run Off</u>	Aggregate Year-to-Date ▼ , , .	

B. Full Name (Last, First, Middle Initial) <u>Yon, Theresa</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 29 2014</u>
Mailing Address		Amount of Each Receipt this Period <u>, , 200.-</u>
City	State Zip Code <u>NC</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>, , 200.-</u>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , .	

C. Full Name (Last, First, Middle Initial) <u>Graham, Phil</u>		Date of Receipt M M / D D / Y Y Y Y <u>07 02 2014</u>
Mailing Address <u>3980 B.Hle Rd</u>		Amount of Each Receipt this Period <u>, , 500.-</u>
City	State Zip Code <u>Gibsonville NC 27245</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>, , 500.-</u>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , .	

SUBTOTAL of Receipts This Page (optional).....▶	<u>, , 5,300.-</u>
TOTAL This Period (last page this line number only).....▶	<u>, , .</u>

140N1M1N1N1

**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)

PAGE 1 OF 5

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Conservatives For Guilford County

Full Name (Last, First, Middle Initial)

A. *Clear Channel*

Date of Disbursement: *07 07 2014*

Mailing Address: _____

City: _____ State: *NC* Zip Code: _____

Purpose of Disbursement: *Radio Ad*

Candidate Name: *Mark Walker* Category/Type: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *Run Off*

State: _____ District: _____

Amount of Each Disbursement this Period: *5,375.00*

B. *Clear Channel*

Date of Disbursement: *07 14 2014*

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: *Radio Ad*

Candidate Name: *Mark Walker* Category/Type: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *Run Off*

State: _____ District: _____

Amount of Each Disbursement this Period: *2,100.00*

C. *Greata Greensboro Realtors Assn*

Date of Disbursement: *08 29 2014*

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: *Rent for Front Line Forum*

Candidate Name: *None* Category/Type: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Amount of Each Disbursement this Period: *100.00*

SUBTOTAL of Disbursements This Page (optional)..... *7,575.00*

TOTAL This Period (last page this line number only)..... *7,675.00*

TOTAL This Period (last page this line number only)..... *16,263.14*

**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)

PAGE 2 OF 5

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Conservatives For Guilford County

Full Name (Last, First, Middle Initial)

A. <i>Greater Greensboro Rotarians Assn</i>		Date of Disbursement
Mailing Address		M M ' D D ' Y Y Y Y <i>07 24 2014</i>
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
<i>Rent For Front Line Food</i>		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
Full Name (Last, First, Middle Initial)		

B. <i>ITI LLC</i>		Date of Disbursement
Mailing Address		M M ' D D ' Y Y Y Y <i>08 22 2014</i>
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
<i>T-shirts for sale</i>		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
Full Name (Last, First, Middle Initial)		

C. <i>Krispy Kreme</i>		Date of Disbursement
Mailing Address		M M ' D D ' Y Y Y Y <i>07 07 2014</i>
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
<i>Food for Volunteers</i>		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
Full Name (Last, First, Middle Initial)		

SUBTOTAL of Disbursements This Page (optional).....▶	<i>776.71</i>
TOTAL This Period (last page this line number only).....▶	<i>16,863.14</i>

**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)

PAGE 3 OF 5

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservatives For Guilford County

A.

Full Name (Last, First, Middle Initial)
News and Record

Mailing Address

City Greensboro State NC Zip Code

Purpose of Disbursement
News Paper Ad

Candidate Name
Mary Walker

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) Run Off

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 04 / 2014

Amount of Each Disbursement this Period
~~5975.~~
4201.89

B.

Full Name (Last, First, Middle Initial)
News Record

Mailing Address

City Greensboro State NC Zip Code

Purpose of Disbursement

Candidate Name
Mary Walker

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) Run Off

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 16 / 2014

Amount of Each Disbursement this Period
2400.

C.

Full Name (Last, First, Middle Initial)
Greensboro Renters Assn

Mailing Address

City Greensboro State NC Zip Code

Purpose of Disbursement
Rent For Front Line Forum

Candidate Name
None

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) Run Off

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 25 / 2014

Amount of Each Disbursement this Period
100.

SUBTOTAL of Disbursements This Page (optional).....▶ 6,701.89

TOTAL This Period (last page this line number only).....▶ 16,863.14

**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)	PAGE <u>4</u> OF <u>5</u>
	<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 type="checkbox"/> 29 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Conservative For Guilford County

Full Name (Last, First, Middle Initial) <u>A. One Source Document Solutions</u>		Date of Disbursement M M / D D / Y Y Y Y <u>07 / 14 / 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>, 1,517.99</u>
City	State	
<u>Greensboro</u>	<u>NC</u>	
Zip Code		
Purpose of Disbursement <u>Primary Door Hinges</u>	Candidate Name <u>slate</u>	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) <u>B. Staples</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 / 27 / 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>, 119.77</u>
City	State	
<u>Greensboro</u>	<u>NC</u>	
Zip Code		
Purpose of Disbursement <u>Supplies</u>	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) <u>C. Target</u>		Date of Disbursement M M / D D / Y Y Y Y <u>07 / 07 / 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>, 84.15</u>
City	State	
<u>Greensboro</u>	<u>NC</u>	
Zip Code		
Purpose of Disbursement <u>Front Line Prizes</u>	Candidate Name <u>None</u>	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<u>, 1721.91</u>
TOTAL This Period (last page this line number only).....▶	<u>, 16,863.14</u>

**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)

PAGE 5 OF 5

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative For Guilford County

A.

Full Name (Last, First, Middle Initial) *USPS*

Mailing Address

City State Zip Code *NC*

Purpose of Disbursement *PO Box*

Candidate Name *None*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement *07/10/2014*

Amount of Each Disbursement this Period *46.*

B.

Full Name (Last, First, Middle Initial) *USPS*

Mailing Address

City State Zip Code

Purpose of Disbursement *PO Box + Stamps*

Candidate Name *None*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period *41.63*

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶ *87.63*

TOTAL This Period (last page this line number only)..... ▶ *16,863.14*

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PREPARER

11/6/14
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