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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Other Than An	Authorized Comm	ittee		Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAILING LAI OR TYPE OR PRINT	BEL Example:If typ over the lines	ing, type		
North Carolina Medical Socie	ty Federal Political Educa	tion and Action Committe	e 		
			<u> </u>		
ADDRESS (number and street)	PO Box 25834				
Check if different	222 N. Person Street		1 1 1 1 1 1		1
than previously reported. (ACC)	Raleigh			NC	27611
2. FEC IDENTIFICATION NUM	BER 🔻	CITY 🛋	S	STATE A	ZIPCODE 🛕
C00003152		3. IS THIS X	NEW (N) OR	AM (A	MENDED .)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)	May 20 (M5)	H	20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		` ′	1	H	Year Only)
April 15 Quarterly Report(Q		Apr 20 (M4) Primary (Jul 20 (M7)	General (20 (M10) Jan 31 (YE) (12G) Runoff (12R)
X July 15 Quarterly Report(Q:	DDE Classic	on H		Special (
October 15 Quarterly Report(Q			(' '		
January 31 Quarterly Report(YI	Ξ)	Election on		• • •	in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	Post -Elec	,	30G)	Runoff (3	Special (30S)
Termination Report (TER)		Election on			in the State of
5. Covering Period 0 4	01 200	8 throug	h 06	3 0	2008
I certify that I have examined this F	·		t is true, correct a	ınd complete.	
Type or Print Name of Treasurer	, Asst Treasurer Ste	phen W. Keene			
Signature of Treasurer Electron	nically Filed by ,Asst T	reasurer Stephen W. Kee	ene Da	ate 07	10 2008
NOTE : Submission of false, error	neous, or incomplete infor	mation may subject the p	erson signing this	Report to the	penalties of 2 U.S.C 437g.
Office Use					FEC FORM 3X

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

R	eport Covering the Period: From:	01 2008	To: 0 6 3 0 2 0 0 8
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Ž00Š Y Y		93459.38
	(b) Cash on Hand at Begining of Reporting Period	101588.91	
	(c) Total Receipts (from Line 19)	4681.71	14891.24
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	106270.62	108350.62
7.	Total Disbursements (from Line 31)	0.00	2080.00
3.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	106270.62	106270.62
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)	0.00	7

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

North Carolina Medical Society Federal Political Education and Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees (i) Itemized (use Schedule A)	840.00	4340.00				
(i) Itemized (dae deficable A)	3701.00	10291.00				
(ii) Unitemized		10291.00				
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4541.00	14631.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00				
11(a)(iii),(b) and (c)) (Carry	4541.00	14631.00				
Totals to Line 33, page 5)	4341.00	14001.00				
. Transfers From Affiliated/Other Party Committees	0.00	0.00				
1 arty Committees						
. All Loans Received	0.00	0.00				
. Loan Repayments Received	0.00	0.00				
. Offsets To Operating Expenditures						
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00				
. Refunds of Contributions Made						
to Federal candidates and Other	0.00	0.00				
Political Committees	0.00					
Other Federal Receipts (Dividends, Interest, etc.)	140.71	260.24				
. Transfers from Non-Federal and Levin Funds						
(a) Non-Federal Account	0.00	0.00				
(from Schedule H3)	5.00	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				
. Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))	4681.71	14891.24				
. Total Federal Receipts	100171	44001.0				
(subtract Line 18(c) from Line 19)	4681.71	14891.24				

DETAILED SUMMARY PAGE

of Disbursements

Page 4

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COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 2000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 80.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 0.00 2080.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 0.00 2080.00 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

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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)	4541.00	14631.00				
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00				
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4541.00	14631.00				
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				

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/8 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Medical Society Fed	eral Political E	ducation and Action Commit	ttee
Full Name (Last, First, Middle Initial) Dr. Leonard J. Newton			Date of Receipt
Mailing Address PO Box 549			0 5 2 1 2 0 0 8
City	State	Zip Code	Transaction ID: SA11AI.12389
Pinehurst FEC ID number of contributing federal political committee.	NC C	28370	Amount of Each Receipt this Period 250.00
Name of Employer Mid-Carolina Physician Or- ganization	Occupation Physician		Individual member contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Benedict O. Okwara			Date of Receipt
Mailing Address 4727 Piper Glen Dri	ve		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte	State NC	Zip Code 28277-0370	Transaction ID: SA11AI.12366 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer First Care Medical Clinic- Monroe	Occupation Physician		Individual Membership Contribution
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Martin Wade Stallings			Date of Receipt
Mailing Address 108 Edgemont Drive	e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.12364
Kings Mountain FEC ID number of contributing federal political committee.	NC C	28086-2702	Amount of Each Receipt this Period 90.00
Name of Employer Kings Mountain Pediatrics	Occupation Physician		Individual Membership Contribution
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 340.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		590.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 7/8							
		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)										
North Carolina Medical Society Feder	al Political E	ducation and Action Commit	tee							
Full Name (Last, First, Middle Initial) Dr. James Edward Tomblin			Date of Receipt							
Mailing Address 1507 Westover Terrac Ste C	ce		04 21 7 2008							
City	State	Zip Code	Transaction ID: SA11Al.12359							
Greensboro	NC	27408-7121	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		250.00							
Name of Employer Physicians for Women of Greensboro	Occupatio Physicia		Individual Membership Contribution							
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00								

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	840.00

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or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any personen name and address of any political committee to eral Political Education and Action Committee.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address PO Box 563966 City	State Zip Code	Date of Receipt 0 5 3 0 2 0 0 8 Transaction ID: SA17.12396
Raleigh	NC 28262	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.36
Name of Employer	Occupation	Interest earned in May
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 211.59	
Full Name (Last, First, Middle Initial) Wachovia Bank	-1	Date of Receipt
Mailing Address PO Box 563966		0 6 3 0 7 2 0 0 8
City	State Zip Code	Transaction ID: SA17.12419
Raleigh	NC 28262	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.65
Name of Employer	Occupation	Interest earned in June
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.24	

			 			_
SUBTOTAL of Receipts This Page (optional)		<u></u>		_	95.01	╛
TOTAL This Period (last page this line number only)	→		 		95.01	