

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

COAKLEY FOR CONGRESS ELECTION COMMITTEE

ADDRESS (number and street)

PO BOX 480279

Check if different than previously reported. (ACC)

CHARLOTTE

NC

28269

2. **FEC IDENTIFICATION NUMBER**

C C00558106

CITY

STATE

ZIP CODE

STATE DISTRICT

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

NC

12

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 Thomas Datwyler

Signature of Treasurer Thomas Datwyler

[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

COAKLEY FOR CONGRESS ELECTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 17 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	58413.00	118434.65
(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)).....	58413.00	118434.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43106.57	78529.68
(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)).....	43106.57	78529.68
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40035.97	
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	

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

COAKLEY FOR CONGRESS ELECTION COMMITTEE

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).....	26200.00	65050.00
(ii) Unitemized.....	18013.00	27884.65
(iii) TOTAL of contributions from individuals ▶	44213.00	92934.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14200.00	25500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	58413.00	118434.65
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	131.00	131.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	58544.00	118565.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43106.57	78529.68
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) ►	43106.57	78529.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24598.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58544.00
25. SUBTOTAL (add Line 23 and Line 24).....	83142.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43106.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40035.97

**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 5 OF 48
	<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	

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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Doug Burns

Mailing Address 14020 Wolf Den Ln

City State Zip Code
Charlotte NC 28277

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.5428

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James Callis

Mailing Address 7911 Pemswood St

City State Zip Code
Charlotte NC 28277-2807

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2014

Transaction ID : SA11AI.5458

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Robert Calton

Mailing Address 2128 Sherwood Ave

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
SPP Management Services Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.5571

Amount of Each Receipt this Period
500.00

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

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

1100.00

**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 6 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Grant Campbell

Mailing Address 9910 Hillspring Dr

City State Zip Code
Huntersville NC 28078

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

Name of Employer Occupation
Carolinas Physician Network Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.5326

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
George Couchell

Mailing Address 1317 Alfred St

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
Showmars Restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.5431

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Bill Crowder

Mailing Address 3032 Back Creek Church Rd

City State Zip Code
Charlotte NC 28213

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

Name of Employer Occupation
Crowder Construction Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.5482

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 1004 Mohawk St

City Clearwater State FL Zip Code 33755

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.5427

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Steele Dewey

Mailing Address 610 E Morehead St
Suite 100

City Charlotte State NC Zip Code 28202

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

Name of Employer Alston Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : SA11AI.5460

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ernest Ellison

Mailing Address 6720 Churchill Park Ct

City Charlotte State NC Zip Code 28210

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11AI.5342

Amount of Each Receipt this Period
2000.00

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

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

2750.00

**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 8 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ernest Ellison

Mailing Address 6720 Churchill Park Ct

City State Zip Code
Charlotte NC 28210

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : SA11AI.5415

Amount of Each Receipt this Period
300.00

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

Mailing Address 201 N Tryon St
Suite 3000

City State Zip Code
Charlotte NC 28202

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

Name of Employer Occupation
McGuire Woods LLP Vice Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2014

Transaction ID : SA11AI.5369

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lawrence Gelman

Mailing Address 3900 Sundown Dr

City State Zip Code
McAllen CA 78503

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

Name of Employer Occupation
McAllen Anesthesia Consultants Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11AI.5386

Amount of Each Receipt this Period
2500.00

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

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

3800.00

**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 9 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Eunice Goodan		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 2550 Aberdeen Ave		Transaction ID : SA11AI.5310	
City Los Angeles	State CA	Zip Code 90027	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. James Hall		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 1114 Belgrave Place		Transaction ID : SA11AI.5346	
City Charlotte	State NC	Zip Code 28203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer CMC	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) C. James Hall		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 1114 Belgrave Place		Transaction ID : SA11AI.5412	
City Charlotte	State NC	Zip Code 28203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CMC	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Robin Hayes

Mailing Address **PO Box 954**

City **Concord** State **NC** Zip Code **28026**

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

Name of Employer **Self Employed** Occupation **Investor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2014

Transaction ID : SA11AI.5382

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Ivan Hinrichs

Mailing Address **6000 Fairview Rd Ste. 400**

City **Charlotte** State **NC** Zip Code **28210**

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

Name of Employer **HFCB, LLC** Occupation **Benefits Planning**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.5344

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Ivan Hinrichs

Mailing Address **6000 Fairview Rd Ste. 400**

City **Charlotte** State **NC** Zip Code **28210**

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

Name of Employer **HFCB, LLC** Occupation **Benefits Planning**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 24 / 2014

Transaction ID : SA11AI.5465

Amount of Each Receipt this Period
 1600.00

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

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

3600.00

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

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

FOR LINE NUMBER: PAGE 11 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Michael Kahn

Mailing Address 8406 Eagle Glen Way

City State Zip Code
Charlotte NC 28210

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

Name of Employer Occupation
Charlotte Checkers Sports

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.5441

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Graeme Keith

Mailing Address 2301 Richardson Dr

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
The Keith Corp Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.5411

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bill Lehw

Mailing Address 9900 Lampkin Park Dr

City State Zip Code
Charlotte NC 28269

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

Name of Employer Occupation
Hines Securities Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.5345

Amount of Each Receipt this Period
250.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 12 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
John Lewis

Mailing Address 300 W 5th St
Unit 512

City State Zip Code
Charlotte NC 28202

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2014

Transaction ID : SA11AI.5400

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sandra Long

Mailing Address 134 Perrin Pl

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.5358

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Philip Mahoney

Mailing Address 635 Llewellyn Pl

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
American Security Mortgage Mortgage Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period
1000.00

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

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

1500.00

**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 13 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Albert McAulay

Mailing Address 1836 Pinewood Cir

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
The McAulay Firm Executive Search Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Martin McCoy

Mailing Address 519 South St

City State Zip Code
Davidson NC 28036

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

Name of Employer Occupation
Fulcra Enterprises Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.5073

Amount of Each Receipt this Period
400.00

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

Mailing Address 5815 Westpark Dr

City State Zip Code
Charlotte NC 28217

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.5559

Amount of Each Receipt this Period
500.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 14 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ed McMahan

Mailing Address 5815 Westpark Dr

City State Zip Code
Charlotte NC 28217

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.5438

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Michael Miltich

Mailing Address 18021 Nantz Rd

City State Zip Code
Cornelius NC 28031-8606

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

Name of Employer Occupation
CEENTA Otolaryngologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : SA11AI.5317

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Michael Miltich

Mailing Address 18021 Nantz Rd

City State Zip Code
Cornelius NC 28031-8606

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

Name of Employer Occupation
CEENTA Otolaryngologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11AI.5485

Amount of Each Receipt this Period
250.00

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 15 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 17120 Belle Isle Dr

City State Zip Code
Cornelius NC 28031

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

Name of Employer Occupation
Gyn Care of the Carolinas Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Margaret Roche

Mailing Address 7700 Baltusrol Ln

City State Zip Code
Charlotte NC 28210

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5312

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Daniel Rufty

Mailing Address 8612 Tweedsmuir Glen Ln

City State Zip Code
Charlotte NC 28227

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2014

Transaction ID : SA11AI.5459

Amount of Each Receipt this Period
100.00

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

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

850.00

**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 16 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Harold Sellers

Mailing Address 511 Buckhead Ct

City	State	Zip Code
Charlotte	NC	28211-6172

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Eric Sklut

Mailing Address 3418 Kingsmeade Ct

City	State	Zip Code
Charlotte	NC	28226

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

Name of Employer	Occupation
Perfection Automotive	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		28		2014

Transaction ID : SA11AI.5373

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
J Spears

Mailing Address 229 N Church St Unit 300

City	State	Zip Code
Charlotte	NC	28202

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

Name of Employer	Occupation
Riverside Millwork Inc	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11AI.5153

Amount of Each Receipt this Period

250.00

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 17 OF 48
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Juanita Stirrup

Mailing Address 6735 Cypress Point Dr

City	State	Zip Code
Houston	TX	77069-2426

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.5329

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
Philip Summa

Mailing Address 5419 Sunningdale Drive

City	State	Zip Code
Charlotte	NC	28277

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

Name of Employer	Occupation
Parsons Summa	Patent Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.5567

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
Ann Tarwater

Mailing Address 1414 Billmore Dr

City	State	Zip Code
Charlotte	NC	28207

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.5440

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 48

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Robert Walker

Mailing Address 411 Forest St

City Lewisburg State TN Zip Code 37091

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11Al.4836

Amount of Each Receipt this Period
 2600.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2600.00

26200.00

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

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

FOR LINE NUMBER: PAGE 19 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Committee to Elect Larry Pittman

Mailing Address PO Box 6311

City State Zip Code
Concord NC 28027

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11C.5597

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
FOXX PAC

Mailing Address 22780 INDIAN CREEK DRIVE SUITE 100

City State Zip Code
DULLES VA 20166

FEC ID number of contributing federal political committee. **C** C00525212

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11C.5580

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GOH CONSERVATIVE PAC / LOUIEPAC

Mailing Address 1121 ESE LOOP 323 SUITE 101

City State Zip Code
TYLER TX 75701

FEC ID number of contributing federal political committee. **C** C00528596

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11C.5582

Amount of Each Receipt this Period
5000.00

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

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

6200.00

**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 20 OF 48
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City: CONCORD State: NC Zip Code: 28027

FEC ID number of contributing federal political committee: **C C00504522**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 05 / 27 / 2014

Transaction ID : SA11C.5588

Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
JEFF DUNCAN FOR CONGRESS

Mailing Address PO BOX 845

City: LAURENS State: SC Zip Code: 29360

FEC ID number of contributing federal political committee: **C C00460550**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 05 / 2014

Transaction ID : SA11C.5590

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City: ALEXANDRIA State: VA Zip Code: 22314

FEC ID number of contributing federal political committee: **C C00540187**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 20 / 2014

Transaction ID : SA11C.5584

Amount of Each Receipt this Period: 500.00

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

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

3500.00

**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 21 OF 48
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEXT CENTURY FUND

Mailing Address 116 S ROYAL STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00343947

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11C.5554

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
THOMAS MASSIE FOR CONGRESS

Mailing Address PO BOX 1444

City State Zip Code
FLORENCE KY 41022

FEC ID number of contributing federal political committee. **C** C00509729

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11C.5586

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
TREY GOWDY FOR CONGRESS

Mailing Address PO BOX 3324

City State Zip Code
SPARTANBURG SC 29304

FEC ID number of contributing federal political committee. **C** C00462523

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11C.5592

Amount of Each Receipt this Period
1000.00

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

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

4500.00

14200.00

**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 22 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 8625 Arbor Creek Drive		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.5499
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Bank Fees	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Blue Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address E 5th St & N College St		Amount of Each Disbursement this Period 275.74 Transaction ID : SB17.5504
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement Food and Beverage	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Care of Advantage Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 2300 Clarendon Boulevard Ste 303		Amount of Each Disbursement this Period 179.20 Transaction ID : SB17.5507
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	464.94
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 23 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Care of Advantage Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 2300 Clarendon Boulevard Ste 303		Amount of Each Disbursement this Period 1110.90
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Campaign Marketing	Transaction ID : SB17.5508
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Debbie Coakley		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Salary	Transaction ID : SB17.5502
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Debbie Coakley		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Salary	Transaction ID : SB17.5514
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	2110.90
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 24 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Debbie Coakley		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5541
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. VINCENT EDWARD COAKLEY		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 1114.49 Transaction ID : SB17.5545
City CHARLOTTE	State NC	
Zip Code 28269	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Thomas Datwyler		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 3365 Cherry Lane Unit D		Amount of Each Disbursement this Period 525.00 Transaction ID : SB17.5513
City Woodbury	State MN	
Zip Code 55129	Purpose of Disbursement Accounting and Reporting	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	2139.49
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 25 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dyce Communications, LLC		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5486
City Charlotte	State NC Zip Code 28277	
Purpose of Disbursement Expense Reimbursement	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. PizzaHut		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 3044 Eastway Dr		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5486.0
City Charlotte	State NC Zip Code 28205	
Purpose of Disbursement Food and Beverage	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Charlotte Motor Speedway		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 5555 Concord Parkway South		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.5486.1
City Concord	State NC Zip Code 28027	
Purpose of Disbursement Event Registration	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	100.00
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 26 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dyce Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014		
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235			Amount of Each Disbursement this Period 437.09		
City Charlotte	State NC	Zip Code 28277	Transaction ID : SB17.5500		
Purpose of Disbursement Expense Reimbursement		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) B. MailChimp			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014		
Mailing Address 512 Means St Ste 404			Amount of Each Disbursement this Period 55.00		
City Atlanta	State GA	Zip Code 30318	Transaction ID : SB17.5500.0		
Purpose of Disbursement E-mail Fee		Category/ Type 001	[MEMO ITEM]		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) c. Cracker Barrel			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014		
Mailing Address 3203 Queen City Dr			Amount of Each Disbursement this Period 45.69		
City Charlotte	State NC	Zip Code 28208	Transaction ID : SB17.5500.1		
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM]		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

SUBTOTAL of Disbursements This Page (optional).....	437.09
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 27 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		01		2014	
M M	/	D D	/	Y Y Y Y									
05		01		2014									
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28217</td> </tr> </table>			City	State	Zip Code	Charlotte	NC	28217					
City	State	Zip Code											
Charlotte	NC	28217											
Purpose of Disbursement Postage		<table border="1"> <tr> <td>001</td> </tr> </table>	001										
001													
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5500.2											
<table border="1"> <tr> <td>Office Sought:</td> <td><input checked="" type="checkbox"/> House</td> <td>Disbursement For: 2014</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td></td> <td><input type="checkbox"/> President</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>			Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014		<input type="checkbox"/> Senate	<input type="checkbox"/> Primary		<input type="checkbox"/> President	<input checked="" type="checkbox"/> General		
Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014											
	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary											
	<input type="checkbox"/> President	<input checked="" type="checkbox"/> General											
		<input type="checkbox"/> Other (specify)											
State: NC District: 12		[MEMO ITEM]											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Office Depot		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		01		2014	
M M	/	D D	/	Y Y Y Y									
05		01		2014									
Mailing Address 8658 Jw Clay Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28262</td> </tr> </table>			City	State	Zip Code	Charlotte	NC	28262					
City	State	Zip Code											
Charlotte	NC	28262											
Purpose of Disbursement Office Supplies		<table border="1"> <tr> <td>001</td> </tr> </table>	001										
001													
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5500.3											
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Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014											
	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary											
	<input type="checkbox"/> President	<input checked="" type="checkbox"/> General											
		<input type="checkbox"/> Other (specify)											
State: NC District: 12		[MEMO ITEM]											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. FedEx		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		01		2014	
M M	/	D D	/	Y Y Y Y									
05		01		2014									
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28210</td> </tr> </table>			City	State	Zip Code	Charlotte	NC	28210					
City	State	Zip Code											
Charlotte	NC	28210											
Purpose of Disbursement Printing		<table border="1"> <tr> <td>001</td> </tr> </table>	001										
001													
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5500.4											
<table border="1"> <tr> <td>Office Sought:</td> <td><input checked="" type="checkbox"/> House</td> <td>Disbursement For: 2014</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td></td> <td><input type="checkbox"/> President</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>			Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014		<input type="checkbox"/> Senate	<input type="checkbox"/> Primary		<input type="checkbox"/> President	<input checked="" type="checkbox"/> General		
Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014											
	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary											
	<input type="checkbox"/> President	<input checked="" type="checkbox"/> General											
		<input type="checkbox"/> Other (specify)											
State: NC District: 12		[MEMO ITEM]											

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 28 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mecklenburg County Republican Party		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 2501 Oxford Place		Amount of Each Disbursement this Period 31.00
City Charlotte	State NC	
Zip Code 28207	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5500.5
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Dyce Communications, LLC		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 1500.00
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement May Retainer	Transaction ID : SB17.5501
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Dyce Communications, LLC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 208.32
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.5526
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1708.32
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 29 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. MailChimp		M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 512 Means St Ste 404		Amount of Each Disbursement this Period
City Atlanta State GA Zip Code 30318		60.00
Purpose of Disbursement E-mail Fees		Transaction ID : SB17.5526.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Red Robin		M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 8304 Kenbrooke Drive		Amount of Each Disbursement this Period
City Charlotte State NC Zip Code 28262		64.06
Purpose of Disbursement Food and Beverage		Transaction ID : SB17.5526.1
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Hawthorne's		M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 5814 B-5 Prosperity Church Road		Amount of Each Disbursement this Period
City Charlotte State NC Zip Code 28269		24.73
Purpose of Disbursement Food and Beverage		Transaction ID : SB17.5526.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 30 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. The Burger Company		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address 1500 West Morehead Street		Amount of Each Disbursement this Period 32.99
City Charlotte	State NC	
Zip Code 28208	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5526.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. The Burger Company		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 1500 West Morehead Street		Amount of Each Disbursement this Period 26.54
City Charlotte	State NC	
Zip Code 28208	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5526.4
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Dyce Communications, LLC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 201.50
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement Web Production	Transaction ID : SB17.5527
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	201.50
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 31 OF 48			
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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dyce Communications, LLC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5528
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement June Retainer	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 25.60 Transaction ID : SB17.5537
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 46.80 Transaction ID : SB17.5538
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1572.40
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 32 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 55.96 Transaction ID : SB17.5542
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Campaign Marketing	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. FORSYTH COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 667 Peters Creek Parkway		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5549
City Salem	State NC	
Zip Code 27103	Purpose of Disbursement Event Registration- Luncheon	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Fredom Works Grassroots Rally		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 400 North Capitol Street, NW Ste 765		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5492
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Fundraising Expense	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	230.96
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 33 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 328.01 Transaction ID : SB17.5493
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5498
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 236.18 Transaction ID : SB17.5522
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1764.19
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 34 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NORTH CAROLINA REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1506 HILLSBOROUGH STREET		Amount of Each Disbursement this Period 150.00
City RALEIGH State NC Zip Code 27605	Purpose of Disbursement Event Registration Fee	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5522.0 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Park It		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2014
Mailing Address 1440 South Tryon Street		Amount of Each Disbursement this Period 27.00
City Charlotte State NC Zip Code 28202	Purpose of Disbursement Parking	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5522.1 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

Full Name (Last, First, Middle Initial) c. North Carolina Board of Elections		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 441 N. Harrington St.		Amount of Each Disbursement this Period 15.00
City Raleigh State NC Zip Code 27603	Purpose of Disbursement Election Map	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5522.2 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 35 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. North Carolina Federation of College Republicans		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address PO Box 12905		Amount of Each Disbursement this Period 44.18
City Raleigh	State NC	
Zip Code 27605	Purpose of Disbursement Event Registration Fee	Transaction ID : SB17.5522.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Sean McGowan		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 2400.00
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Salary	Transaction ID : SB17.5524
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Sean McGowan		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 107.67
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Mileage Reimbursement	Transaction ID : SB17.5525
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2507.67
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 36 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Sean McGowan		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 180.13 Transaction ID : SB17.5534
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Sean McGowan		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5539
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Nationwide		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 3390 Atlantic Ave Ste. 2		Amount of Each Disbursement this Period 67.00 Transaction ID : SB17.5532
City Brooklyn	State NY	
Zip Code 11208	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1447.13
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 37 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ninth Street Investors		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 1999.99 Transaction ID : SB17.5530
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. NORTH CAROLINA REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1506 HILLSBOROUGH STREET		Amount of Each Disbursement this Period 270.00 Transaction ID : SB17.5547
City RALEIGH	State NC Zip Code 27605	
Purpose of Disbursement Event Registration	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 20.81 Transaction ID : SB17.5494
City San Jose	State CA Zip Code 95131	
Purpose of Disbursement Credit Card Fees	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2290.80
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 38 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. PayPal			Date of Disbursement MM / DD / YYYY 05 / 31 / 2014
Mailing Address 2211 N. First St.			Amount of Each Disbursement this Period 78.13 Transaction ID : SB17.5518
City San Jose	State CA	Zip Code 95131	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 12		

Full Name (Last, First, Middle Initial) B. PayPal			Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 2211 N. First St.			Amount of Each Disbursement this Period 158.50 Transaction ID : SB17.5546
City San Jose	State CA	Zip Code 95131	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 12		

Full Name (Last, First, Middle Initial) c. Photos by James Piedad			Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 2520 Fernwood Drive			Amount of Each Disbursement this Period 275.00 Transaction ID : SB17.5540
City Greensboro	State NC	Zip Code 27408	
Purpose of Disbursement Photos		Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 12		

SUBTOTAL of Disbursements This Page (optional).....	511.63
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 39 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. PostNet Print & Copy Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 5806-A2 Prosperity Church rd		Amount of Each Disbursement this Period 264.58 Transaction ID : SB17.5497
City Charlotte	State NC	
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.5509
City Charlotte	State NC	
Purpose of Disbursement Expense Reimbursement	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.5509.0 [MEMO ITEM]
City Charlotte	State NC	
Purpose of Disbursement Stamps	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	264.58
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 40 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5510
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 457.50 Transaction ID : SB17.5511
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Commission	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Jay Rao		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 317.22 Transaction ID : SB17.5521
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3774.72
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 41 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 195.00
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Transaction ID : SB17.5521.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 122.22
City Charlotte	State NC	
Zip Code 28216	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5521.1
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Jay Rao		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Salary	Transaction ID : SB17.5523
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 42 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 811.74 Transaction ID : SB17.5533
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 487.50 Transaction ID : SB17.5533.0 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. FedEx		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 272.35 Transaction ID : SB17.5533.1 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Printing and Office Supplies	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	811.74
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 43 OF 48	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mini Mac Paper		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 2405 S Tryon St		Amount of Each Disbursement this Period 51.89
City Charlotte	State NC	
Zip Code 28203	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5533.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 838.75
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Commission	Transaction ID : SB17.5535
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. SFS Production		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 640 East Rambo Rd		Amount of Each Disbursement this Period 500.00
City Rock Hill	State SC	
Zip Code 29730	Purpose of Disbursement Video Production	Transaction ID : SB17.5512
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1338.75
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 44 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. SFS Production		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 640 East Rambo Rd		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5516
City Rock Hill	State SC	
Purpose of Disbursement Video Production	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Spint Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 6391 Sprint Parkway		Amount of Each Disbursement this Period 320.25 Transaction ID : SB17.5488
City Overland Park	State KS	
Purpose of Disbursement Phones	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Spint Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 6391 Sprint Parkway		Amount of Each Disbursement this Period 242.05 Transaction ID : SB17.5543
City Overland Park	State KS	
Purpose of Disbursement Phones	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1062.30
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 45 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Strategic Impact		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 333 West Vine St Suite 300		Amount of Each Disbursement this Period 4703.59
City Lexington State KY Zip Code 40517	Category/Type 001	
Purpose of Disbursement Direct Mail	Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Transaction ID : SB17.5515
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00
City Harrisburg State NC Zip Code 28075	Category/Type 001	
Purpose of Disbursement Campaign Management Services	Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Transaction ID : SB17.5496
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 91.62
City Harrisburg State NC Zip Code 28075	Category/Type 001	
Purpose of Disbursement Expense Reimbursement	Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Transaction ID : SB17.5505
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	8595.21
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 46 OF 48			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 78.40
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Postage	Transaction ID : SB17.5505.0 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 5825 Thunder Rd		Amount of Each Disbursement this Period 10.23
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5505.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. CVS		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 5225 Poplar Tent Rd		Amount of Each Disbursement this Period 2.99
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5505.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 47 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00 Transaction ID : SB17.5519
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Campaign Management Services 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5520
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Campaign Management Services 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Team Sports & Performance Apparel		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 6025 Royal Lane Ste 126		Amount of Each Disbursement this Period 501.25 Transaction ID : SB17.5490
City Dallas State TX Zip Code 75230	Purpose of Disbursement Campaign T-Shirts 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	5801.25
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 48 OF 48			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Team Sports & Performance Apparel			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014	
Mailing Address 6025 Royal Lane Ste 126			Amount of Each Disbursement this Period 971.00	
City Dallas	State TX	Zip Code 75230	Transaction ID : SB17.5517	
Purpose of Disbursement Campaign T-Shirts		Category/Type 001		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NC	District: 12			

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		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.			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		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).....	971.00
TOTAL This Period (last page this line number only).....	43106.57