

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
North Carolina Medical Society Federal Political Education and Action Committee

ADDRESS (number and street) PO Box 25834
222 N. Person Street
Raleigh NC 27611
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00003152 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of NC

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2016 through 11 / 28 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Keene, Asst Treasurer, Stephen, W, ,
Type or Print Name of Treasurer

Signature of Treasurer Keene, Asst Treasurer, Stephen, W, , [Electronically Filed] Date 01 / 27 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		39596.32
(b) Cash on Hand at Beginning of Reporting Period.....	20268.65	
(c) Total Receipts (from Line 19)	2420.00	11092.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	22688.65	50688.65
7. Total Disbursements (from Line 31).....	14000.00	42000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8688.65	8688.65
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	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	840.00
(ii) Unitemized	2420.00	10250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2420.00	11090.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2420.00	11090.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	2.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2420.00	11092.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2420.00	11092.33

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	14000.00	42000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14000.00	42000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14000.00	42000.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2420.00	11090.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2420.00	11090.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Avila, Marilyn, , ,

Mailing Address 11312 Derby Lane

City Raleigh State NC Zip Code 27613

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Brawley, Bill, , ,

Mailing Address 13612 O'Toole Drive

City Matthews State NC Zip Code 28105

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Bryan, John Hugh, , Dr.,

Mailing Address Cape Fear Valley Medical Center
Box 41208

City Fayetteville State NC Zip Code 28309

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16359

Amount of Each Disbursement this Period

1000.00

Memo Item

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16372

Amount of Each Disbursement this Period

1000.00

Memo Item

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16369

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Dobson, Josh, , ,

Mailing Address 300 N Salisbury Street

City Raleigh

State NC

Zip Code 27603

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C []

Transaction ID : SB29.16368

Amount of Each Disbursement this Period

[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Goodman, Ken, , ,

Mailing Address 832 WILLIAMSBURG DRIVE

City Rockingham

State NC

Zip Code 28379

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C []

Transaction ID : SB29.16365

Amount of Each Disbursement this Period

[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Insko, Verla, , ,

Mailing Address 610 Surry Road

City Chapel Hill

State NC

Zip Code 27514

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C []

Transaction ID : SB29.16363

Amount of Each Disbursement this Period

[] 500.00

Memo Item

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

[] 2500.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Johnson, Linda, , ,

Mailing Address 1205 Berkshire Dr.

City Kannapolis State NC Zip Code 28081

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16367
 Amount of Each Disbursement this Period
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jones, Bert, , ,

Mailing Address 299 Fairfield Road

City Reidsville State NC Zip Code 27320

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16364
 Amount of Each Disbursement this Period
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lambeth, Donny, , ,

Mailing Address 4627 S. Main Street

City Winston-Salem State NC Zip Code 27127

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16366
 Amount of Each Disbursement this Period
 500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Lewis, David, , ,

Mailing Address PO Box 1826

City
Dunn

State
NC

Zip Code
28335

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16362

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Moore, Tim, , ,

Mailing Address 305 East King St.

City
Kings Mountain

State
NC

Zip Code
28086

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16373

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Moretz, Frank Hannon, , Dr.,

Mailing Address 31 Hawks Branch Circle

City
Fairview

State
NC

Zip Code
28730

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2016			

FEC Identification Number

C

Transaction ID : SB29.16374

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

<input type="text"/>	3000.00
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<input type="text"/>	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Pendleton, Gary, , ,

Mailing Address 300 N. Salisbury Street

City Raleigh State NC Zip Code 27603

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16361
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Saine, Jason, , ,

Mailing Address 1760 Whispering Pines Drive

City Lincolnton State NC Zip Code 28092

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16371
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Setzer, Mitchell, , ,

Mailing Address PO Box 416

City Catawba State NC Zip Code 28609

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16370
Amount of Each Disbursement this Period
500.00

Memo Item

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)

A. Szoka, John, , ,

Mailing Address 16 West Jones Street

City Raleigh State NC Zip Code 27601

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB29.16360
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify)

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

1000.00
14000.00