

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

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="2013"/>	<input type="text" value="4087.75"/>	<input type="text" value="4087.75"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4087.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="18198.00"/>	<input type="text" value="18198.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="22285.75"/>	<input type="text" value="22285.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10068.86"/>	<input type="text" value="10068.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12216.89"/>	<input type="text" value="12216.89"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

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).....	3497.00	3497.00
(ii) Unitemized	13234.00	13234.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16731.00	16731.00
(b) Political Party Committees	742.00	742.00
(c) Other Political Committees (such as PACs).....	725.00	725.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	18198.00	18198.00
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	0.00
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))..... ▶	18198.00	18198.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18198.00	18198.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10068.86	10068.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10068.86	10068.86
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 (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	10068.86	10068.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10068.86	10068.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18198.00	18198.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18198.00	18198.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10068.86	10068.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10068.86	10068.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. Mick Brown		Date of Receipt MM / DD / YYYY 04 / 20 / 2013 Transaction ID : SA11AI.10496
Mailing Address 101 Hunting Bay Dr.		Amount of Each Receipt this Period 290.00
City Cape Carteret	State NC	Zip Code 28584
FEC ID number of contributing federal political committee. C	In-kind - donation of auctioned basket item(s)	
Name of Employer Star Hill CC	Occupation golf pro	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Chris Chadwick		Date of Receipt MM / DD / YYYY 04 / 15 / 2013 Transaction ID : SA11AI.10206
Mailing Address 500 Stacy Loop Rd		Amount of Each Receipt this Period 150.00
City Stacy	State NC	Zip Code 28581
FEC ID number of contributing federal political committee. C	convention program ad	
Name of Employer self	Occupation merchant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Chris Chadwick		Date of Receipt MM / DD / YYYY 05 / 01 / 2013 Transaction ID : SA11AI.10360
Mailing Address 500 Stacy Loop Rd		Amount of Each Receipt this Period 5.00
City Stacy	State NC	Zip Code 28581
FEC ID number of contributing federal political committee. C	50-50 donation	
Name of Employer self	Occupation merchant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	445.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Donna Comer
Full Name (Last, First, Middle Initial)
Mailing Address 322 Wood Farm Rd
City Peletier State NC Zip Code 28584
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation insurance agent
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **295.00**

Date of Receipt **05 / 01 / 2013**
Transaction ID : SA11AI.10329
Amount of Each Receipt this Period **225.00**
donation for auction for county theme baskets

B. Virginia Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 2617 Church St.
City Winterville State NC Zip Code 28590
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **242.00**

Date of Receipt **04 / 20 / 2013**
Transaction ID : SA11AI.10464
Amount of Each Receipt this Period **107.00**
In-kind - donation of auctioned basket item(s)

C. Virginia Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 2617 Church St.
City Winterville State NC Zip Code 28590
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **317.00**

Date of Receipt **05 / 01 / 2013**
Transaction ID : SA11AI.10332
Amount of Each Receipt this Period **75.00**
donation for convention program ad

SUBTOTAL of Receipts This Page (optional)..... **407.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 8 OF 23
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

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

Mailing Address 2440 Commerce Rd.

City Jacksonville	State NC	Zip Code 28546
----------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation self-employed
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2013
Transaction ID : SA11AI.10566

Amount of Each Receipt this Period
 50.00

Pass the hat donation

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

Mailing Address 1403 Chip Shot Dr.

City Morehead City	State NC	Zip Code 28557
-----------------------	-------------	-------------------

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

Name of Employer Frank Door Co.	Occupation Owner
------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2013
Transaction ID : SA11AI.10471

Amount of Each Receipt this Period
 700.00

In-kind - donation of auctioned basket item(s)

Full Name (Last, First, Middle Initial)
C. John Proctor Kidwell

Mailing Address 5690 Cherry Run Rd.

City Washington	State NC	Zip Code 27889
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FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation self
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10333

Amount of Each Receipt this Period
 225.00

donation for county theme basket

SUBTOTAL of Receipts This Page (optional).....▶	975.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Ann Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 Pine Lake Rd.
 City State Zip Code
 Cape Carteret NC 28584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10334
 Amount of Each Receipt this Period
 750.00
 donation for county theme basket

B. Ann Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 Pine Lake Rd.
 City State Zip Code
 Cape Carteret NC 28584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 795.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10402
 Amount of Each Receipt this Period
 5.00
 50-50 donation

C. Jack Millis
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 Arborvitae Drive
 City State Zip Code
 Pine Knoll Shores NC 28512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : SA11AI.10020
 Amount of Each Receipt this Period
 150.00
 convention program ad donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 905.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 23
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Jack Millis
Full Name (Last, First, Middle Initial)
Mailing Address 128 Arborvitae Drive
City Pine Knoll Shores State NC Zip Code 28512
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **05 / 01 / 2013**
Transaction ID : SA11AI.10406
Amount of Each Receipt this Period **5.00**
50-50 donation

B. Jack Millis
Full Name (Last, First, Middle Initial)
Mailing Address 128 Arborvitae Drive
City Pine Knoll Shores State NC Zip Code 28512
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **215.00**

Date of Receipt **05 / 03 / 2013**
Transaction ID : SA11AI.10448
Amount of Each Receipt this Period **5.00**
donation

C. Jack Millis
Full Name (Last, First, Middle Initial)
Mailing Address 128 Arborvitae Drive
City Pine Knoll Shores State NC Zip Code 28512
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **05 / 04 / 2013**
Transaction ID : SA11AI.10544
Amount of Each Receipt this Period **5.00**
Pass the hat donation

SUBTOTAL of Receipts This Page (optional)..... **15.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 11 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. Jack Millis

Mailing Address 128 Arborvitae Drive

City State Zip Code
 Pine Knoll Shores NC 28512

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

Name of Employer Occupation
 Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2013
Transaction ID : SA11AI.10545

Amount of Each Receipt this Period
 5.00

Pass the hat donation

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

Mailing Address PO Box 695

City State Zip Code
 Beaufort NC 28516

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

Name of Employer Occupation
 Pruett Rentals self-employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10335

Amount of Each Receipt this Period
 205.00

donation for conv program ad & county theme basket

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

Mailing Address PO Box 695

City State Zip Code
 Beaufort NC 28516

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

Name of Employer Occupation
 Pruett Rentals self-employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10413

Amount of Each Receipt this Period
 15.00

50-50 donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Bob Pruett
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer Pruett Rentals Occupation self-employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 03 / 2013

Transaction ID : SA11AI.10442

Amount of Each Receipt this Period
10.00

donation

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

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer Pruett Rentals Occupation self-employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 04 / 2013

Transaction ID : SA11AI.10548

Amount of Each Receipt this Period
10.00

Pass the hat donation

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

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2013

Transaction ID : SA11AI.10470

Amount of Each Receipt this Period
250.00

In-kind - donation of auctioned basket item(s)

SUBTOTAL of Receipts This Page (optional)..... ▶ **270.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

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

Mailing Address 803 Stately Pines Rd.

City New Bern State NC Zip Code 28560

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

Name of Employer NC Occupation House of Representatives

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10336

Amount of Each Receipt this Period
 250.00

donation for county theme basket

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

Mailing Address PO Box 244

City Belhaven State NC Zip Code 27810

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : SA11AI.10427

Amount of Each Receipt this Period
 5.00

50-50 donation

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	3497.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Beaufort County GOP
Full Name (Last, First, Middle Initial)
Mailing Address 1243 Little Creek Rd. Ext.
City Belhaven State NC Zip Code 27810
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 33.00

Date of Receipt 04 / 15 / 2013
Transaction ID : SA11B.10198
Amount of Each Receipt this Period 33.00
delegate/alternate fees

B. Carteret County GOP
Full Name (Last, First, Middle Initial)
Mailing Address 5303 Emerald Dr.
City Emerald Isle State NC Zip Code 28594
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 96.00

Date of Receipt 04 / 05 / 2013
Transaction ID : SA11B.10122
Amount of Each Receipt this Period 96.00
conv. delegate fees

C. Carteret County GOP
Full Name (Last, First, Middle Initial)
Mailing Address 5303 Emerald Dr.
City Emerald Isle State NC Zip Code 28594
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.00

Date of Receipt 05 / 01 / 2013
Transaction ID : SA11B.10327
Amount of Each Receipt this Period 300.00
convention program ad donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 429.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Chowan Republican Party
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 72

City Edenton	State NC	Zip Code 27932
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2013

Transaction ID : SA11B.10123

Amount of Each Receipt this Period

6.00

convention delegate fees

B. Craven County GOP
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 13466

City New Bern	State NC	Zip Code 28561
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00000000**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **39.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2013

Transaction ID : SA11B.10266

Amount of Each Receipt this Period

39.00

conv delegate fees

C. Crystal Coast GOP Womens Club
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1492

City Morehead City	State NC	Zip Code 28557
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00000000**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2013

Transaction ID : SA11B.10267

Amount of Each Receipt this Period

25.00

convention table rental

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. Crystal Coast Republican Men's Club

Mailing Address PO Box 253

City Morehead City State NC Zip Code 28557

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2013
Transaction ID : SA11B.10587

Amount of Each Receipt this Period
 100.00

Ten cookbooks

Full Name (Last, First, Middle Initial)
B. Onslow County Republican Party

Mailing Address PO Box 716

City Jacksonville State NC Zip Code 28541

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 45.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2013
Transaction ID : SA11B.10132

Amount of Each Receipt this Period
 45.00

convention registration(s)

Full Name (Last, First, Middle Initial)
C. Pender County Republican Party

Mailing Address PO Box 131

City Hampstead State NC Zip Code 28443

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2013
Transaction ID : SA11B.10133

Amount of Each Receipt this Period
 12.00

convention registration(s)

SUBTOTAL of Receipts This Page (optional).....▶	157.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Perquimans County GOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 Perrys Bridge Rd.
 City Belvidere State NC Zip Code 27919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 21 / 2013
Transaction ID : SA11B.10007
 Amount of Each Receipt this Period
 1.00
 convention delegate fee

B. Pitt County GOP
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8498
 City Greenville State NC Zip Code 27835
 FEC ID number of contributing federal political committee. **C** C00000000
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 05 / 2013
Transaction ID : SA11B.10138
 Amount of Each Receipt this Period
 85.00
 convention delegate fees

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	86.00
TOTAL This Period (last page this line number only).....▶	742.00

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Citizens to Elect Norman Sanderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 Two Lakes Trail
 City New Bern State NC Zip Code 28560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00
 Date of Receipt 04 / 15 / 2013
Transaction ID : SA11C.10616
 Amount of Each Receipt this Period 150.00
 Convention

B. Void
 Full Name (Last, First, Middle Initial)
 Mailing Address xxxxx
 City xxxxx State NC Zip Code 27919
 FEC ID number of contributing federal political committee. **C** H8NC03050
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 04 / 19 / 2013
Transaction ID : SA11C.10269
 Amount of Each Receipt this Period 500.00
 convention program ad

C. Void
 Full Name (Last, First, Middle Initial)
 Mailing Address xxxx
 City xxxx State NC Zip Code 27919
 FEC ID number of contributing federal political committee. **C** H8NC03050
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00
 Date of Receipt 05 / 01 / 2013
Transaction ID : SA11C.10331
 Amount of Each Receipt this Period 75.00
 convention program ad donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00
TOTAL This Period (last page this line number only)..... ▶ 725.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Beaufort Grocery Co.

Mailing Address 117 Queen St.

City Beaufort State NC Zip Code 28516

Purpose of Disbursement
Deposit for conv. food & drink

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2013

Transaction ID : SB21B.9909

Amount of Each Disbursement this Period

500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Beaufort Grocery Co.

Mailing Address 117 Queen St.

City Beaufort State NC Zip Code 28516

Purpose of Disbursement
convention food & drink

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : SB21B.10275

Amount of Each Disbursement this Period

2664.07

Category/
Type

Full Name (Last, First, Middle Initial)

C. Mary Boughton

Mailing Address 204 Hodges St.

City Morehead City State NC Zip Code 28557

Purpose of Disbursement
reimb for convention supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : SB21B.10274

Amount of Each Disbursement this Period

364.60

Category/
Type

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

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

3528.67

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Mick Brown

Mailing Address 101 Hunting Bay Dr.

City State Zip Code
Cape Carteret NC 28584

Purpose of Disbursement
In-kind - donation of auctioned basket item(s)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.10500

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Crystal Coast Civic Center

Mailing Address PO Box 680

City State Zip Code
Morehead City NC 28557

Purpose of Disbursement
convention venue rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.10008

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Crystal Coast Civic Center

Mailing Address PO Box 680

City State Zip Code
Morehead City NC 28557

Purpose of Disbursement
conv tablecloth rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.10277

Amount of Each Disbursement this Period

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

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Terry Frank

Mailing Address 1403 Chip Shot Dr.

City Morehead City State NC Zip Code 28557

Purpose of Disbursement
In-kind - donation of auctioned basket item(s)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : SB21B.10488

Amount of Each Disbursement this Period

700.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Mary Marks

Mailing Address 102-B Reserve Ln

City Morehead City State NC Zip Code 28557

Purpose of Disbursement
reimb for conv supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : SB21B.10273

Amount of Each Disbursement this Period

100.18

Category/
Type

Full Name (Last, First, Middle Initial)

C. Mary Marks

Mailing Address 102-B Reserve Ln

City Morehead City State NC Zip Code 28557

Purpose of Disbursement
In-kind - donation of auctioned basket item(s)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : SB21B.10480

Amount of Each Disbursement this Period

20.00

Category/
Type

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

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

820.18

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Mary Marks

Mailing Address 102-B Reserve Ln

City Morehead City State NC Zip Code 28557

Purpose of Disbursement
Convention supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2013

Transaction ID : SB21B.10278

Amount of Each Disbursement this Period

37.88

Full Name (Last, First, Middle Initial)

B. George McNiff

Mailing Address 246 Ida Bell Lane

City Beaufort State NC Zip Code 28516

Purpose of Disbursement
raffle award

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2013

Transaction ID : SB21B.10276

Amount of Each Disbursement this Period

310.00

Full Name (Last, First, Middle Initial)

C. George McNiff

Mailing Address 246 Ida Bell Lane

City Beaufort State NC Zip Code 28516

Purpose of Disbursement
In-kind - donation of auctioned basket item(s)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2013

Transaction ID : SB21B.10481

Amount of Each Disbursement this Period

20.00

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

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

367.88

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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Pilot Media

Mailing Address P.O. Box 79917

City Baltimore State MD Zip Code 21279-0917

Purpose of Disbursement
3rd District convention program guides

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	3

Transaction ID : SB21B.10574

Amount of Each Disbursement this Period

1	2	0	9	.	4	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Marcia Pruett

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

Purpose of Disbursement
In-kind - donation of auctioned basket item(s)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	3

Transaction ID : SB21B.10489

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

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

1	4	5	9	.	4	4
---	---	---	---	---	---	---

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

8	1	3	1	.	1	7
---	---	---	---	---	---	---