

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2014 MAY 5 AM 11:34

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

BRENT FOR CONGRESS

ADDRESS (number and street)

309 OAKDALE RD

Check if different than previously reported. (ACC)

ROCKY MOUNT

NC

27804

2. FEC IDENTIFICATION NUMBER

C00562165

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

NC

01

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:

X

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

05'06'2014

in the State of

NC

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

02'26'2014

through

04'16'2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BRENT SHYPULEFSKI

Signature of Treasurer

[Handwritten Signature]

Date

04'29'2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

*BRENT FOR CONGRESS*

Report Covering the Period: From:

*02' 26' 2014*

To:

*04' 16' 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)) ....	, 3,130.00	, 3,130.00
(b) Total Contribution Refunds (from Line 20(d)) .....	, ,	, ,
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	, 3,130.00	, 3,130.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	, ,	, ,
(b) Total Offsets to Operating Expenditures (from Line 14) .....	, ,	, ,
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	, ,	, ,
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	, 261.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	, ,	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	, 3,240.00	

**For further information contact:**

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

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

14031233287

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

**BRENT FOR CONGRESS**

Report Covering the Period: From: **02'26'2014**

To: **04'16'2014**

**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).....

2,500.00

2,500.00

(ii) Unitemized.....

630.00

630.00

(iii) TOTAL of contributions from individuals ▶

3,130.00

3,130.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

800.00

800.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

3,930.00

3,930.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....**

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

3,140.00

3,140.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

3,140.00

3,140.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....**

**15. OTHER RECEIPTS (Dividends, Interest, etc.).....**

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

7,070.00

7,070.00

14031233288

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	680851	680851
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs) .....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	680851	680851

14031953289

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	707000
25. SUBTOTAL (add Line 23 and Line 24).....	707000
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	680851
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	26149

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

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)  
**BRENT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
**BOSEMAN, JOEL + JEAN**

Mailing Address  
**42 COOL SPRING RD**

City **BATTLEBORO** State **NC** Zip Code **27809**

FEC ID number of contributing federal political committee. **C00562165**

Name of Employer **SELF** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2,500.00**

Date of Receipt  
**03 ' 19 ' 2014**

Amount of Each Receipt this Period  
**2,500.00**

**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

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

Amount of Each Receipt this Period

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

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

**2,500.00**

14031233290

Unitemized < \$250

\$ 100.00	3/17/2014	NILE & CAROLYN FALK	1500 JEREMY LN	ROCKY MOUNT	NC	27803	LAWYER	SELF
\$ 100.00	3/20/2014	DR.FLOBIAN DELTGEN	2063 LEVELS RD.	COLUMBIA	NC	27925	LINGIST	APEX TRANSLATIONB
\$ 100.00	3/24/2014	GLENN SMITH	154 EDGAR ST.	GOLDSBORO	NC	27530	AECOUNTANT	SELF
\$ 50.00	4/5/2014	H.JUDSON ROSSER	210 WESTVIEW PARK DR.	ROCKY MOUNT	NC	27804	RETIRED	
\$ 50.00	4/15/2014	JUNE SIGNOR	24 FIR STREET	ARNOT	PA	16911	HOMEMAKER	
\$ 100.00	4/3/2014	TIM STONE	247 PARKWAY DRIVE	LITTLETON	NC	27850	RETIRED	
\$ 5.00	3/3/2014	DAVID DUTY	5402 THEALL RD.	HOUSTON	TX	77066	TEACHER	HOUSTON PUBLIC SCHOOLS
\$ 25.00	3/28/2014	JAMES CARNES	811 TIMBERLAKE RD.	FRANKLINTON	NC	27525	RETIRED	
\$ 100.00	4/10/2014	MARY KAYE JOYNER	620 CUDDINGTON	NASHVILLE	NC	27856	TEACHER	NASH COUNTY PUBLIC SCHOOL
\$ 630.00	Total							

14031233291

**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 OF

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

**BRENT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE MEDA CORPORATION**

Date of Disbursement

04'11'2014

Mailing Address

65 TOWN MOUNTAIN RD

City

ASHEVILLE

State

NC

Zip Code

28804

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

MAILING

Candidate Name

BRENT SHYPULEFSKI

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

01

State: NC

District:

Full Name (Last, First, Middle Initial)

**B. GLASGOW SIGN SERVICE**

Date of Disbursement

04'16'2014

Mailing Address

506 SOUTH ALSTON ST

City

NASHVILLE

State

NC

Zip Code

27856

Amount of Each Disbursement this Period

1713.51

Purpose of Disbursement

YARD SIGNS

Candidate Name

BRENT SHYPULEFSKI

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

01

State: NC

District:

Full Name (Last, First, Middle Initial)

**C. STATE BOARD OF ELECTIONS**

Date of Disbursement

02'26'2014

Mailing Address

441 N HARRINGTON ST.

City

RALEIGH

State

NC

Zip Code

27603

Amount of Each Disbursement this Period

1740.00

Purpose of Disbursement

FILLING FEE

Candidate Name

BRENT SHYPULEFSKI

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

01

State: NC

District:

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

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

5953.51

14031233292

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE  OF   
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)

**LOAN SOURCE** Full Name (Last, First, Middle Initial)   
Mailing Address   
City  State  ZIP Code

Election:  
 Primary  
 General  
 Other (specify) ▼

Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This Period

**TERMS** Date Incurred  Date Due  Interest Rate  Secured:  Yes  No  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (apr)

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <input type="text"/>	Name of Employer <input type="text"/>
Mailing Address <input type="text"/>	Occupation <input type="text"/>
City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial) <input type="text"/>	Name of Employer <input type="text"/>
Mailing Address <input type="text"/>	Occupation <input type="text"/>
City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial) <input type="text"/>	Name of Employer <input type="text"/>
Mailing Address <input type="text"/>	Occupation <input type="text"/>
City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial) <input type="text"/>	Name of Employer <input type="text"/>
Mailing Address <input type="text"/>	Occupation <input type="text"/>
City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)..... ▶

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14031233293

**SCHEDULE C-1 (FEC Form 3)**

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
Information found on  
Page \_\_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER <b>C</b>
-----------------------------	---------------------------------------

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) %
---	----------------	--------------------------

Mailing Address	Date Incurred or Established M M / D D / Y Y Y Y
City State Zip Code	Date Due M M / D D / Y Y Y Y

14031233294

A. Has loan been restructured?  No  Yes If yes, date originally incurred M M / D D / Y Y Y Y

B. If line of credit, Total Outstanding Balance: \$ \_\_\_\_\_  
Amount of this Draw: \$ \_\_\_\_\_

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
What is the value of this collateral? \$ \_\_\_\_\_  
Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
What is the estimated value? \$ \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
Date account established: M M / D D / Y Y Y Y  
Location of account: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE M M / D D / Y Y Y Y
---	-----------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE M M / D D / Y Y Y Y
--	-------	-----------------------------

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one)

	9
	10

NAME OF COMMITTEE (In Full)

*BRENT FOR CONGRESS*

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

*BRENT SHYPULEFSKI*

*FILING FEE*

Mailing Address

*PO BOX 5*

City State Zip Code

*Rocky Mount NC 27802*

Outstanding Balance Beginning This Period

, , 0.

Payment This Period

Outstanding Balance at Close of This Period

, , 1,740.00

, , 0.

, , 1,740.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

*BRENT SHYPULEFSKI*

Mailing Address

*PO BOX 5*

City State Zip Code

*Rocky Mount NC 27802*

Outstanding Balance Beginning This Period

, , 0.

Payment This Period

Outstanding Balance at Close of This Period

, , 1,500.00

, , 0.

, , 1,500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

, ,

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶

2) TOTALS This Period (last page this line number only) ▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

*3,240.00*

14031233295

**FEC FORM 3Z (File with Form 3)**

**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**

(To Be Used By A Principal Campaign Committee)

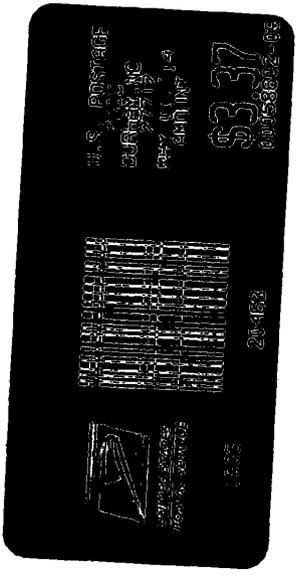
Name of Principal Campaign Committee (In Full)		Report Covering Period:				
		From:		To:		
		M M / D D / Y Y Y Y		M M / D D / Y Y Y Y		
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A						
B	Column Total Last Page Only.....					
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

1403123296

15045

17 NC 29802

14031233297

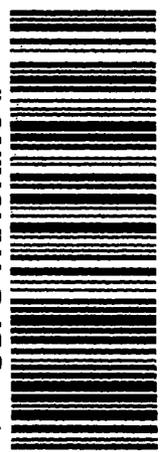


FEDERAL ELECTION COMMITTEE  
 999 E. STREET, NW  
 WASHINGTON DC 20463

RECEIVED  
 2014 MAY -6 AM 11:34  
 FEC MAIL CENTER

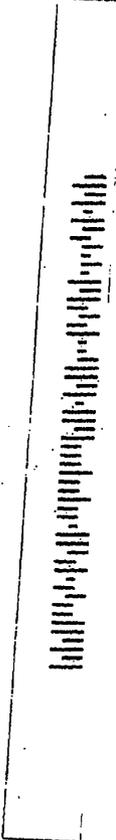


USPS TRACKING #



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Label 400 Jan. 2013  
 7690-16-000-7948



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

14031233298

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 5/1/14
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Pa*

5/6/14

PREPARER  
(8/2013)

DATE PREPARED