

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Old North State PAC

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="2022"/>		27932.55
(b) Cash on Hand at Beginning of Reporting Period.....	5586.22	
(c) Total Receipts (from Line 19)	82969.88	98196.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	88556.10	126128.75
7. Total Disbursements (from Line 31).....	65774.05	103346.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22782.05	22782.05
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Old North State PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2022 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

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	750.00
(ii) Unitemized	0.00	415.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	1165.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	16165.00
12. Transfers From Affiliated/Other Party Committees.....	72869.88	81931.20
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.....	100.00	100.00
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)).....▶	82969.88	98196.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	82969.88	98196.20

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	774.05	1846.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	774.05	1846.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65000.00	101500.00
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).....	0.00	0.00
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)) ..	65774.05	103346.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65774.05	103346.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	10000.00	16165.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	16165.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	774.05	1846.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	774.05	1846.70

**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 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)
Old North State PAC

A. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 PRINCE STREET
 SUITE 300
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C** C00024968
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2022
Transaction ID : SA11C.4606
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 M STREET, NW
 5TH FLOOR
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00004812
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2022
Transaction ID : SA11C.4604
 Amount of Each Receipt this Period 5000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00

**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 7 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. BUDD NC VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9335.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2022

Transaction ID : SA12.4563

Amount of Each Receipt this Period
4534.66

Memo Item
JFC Transfer

B. Medica, Megan, Salzman, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 26815

City Winston Salem	State NC	Zip Code 27114
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2022

Transaction ID : SA12.4563.0

Amount of Each Receipt this Period
5000.00

Memo Item
JFC Attribution

C. BUDD NC VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14006.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2022

Transaction ID : SA12.4571

Amount of Each Receipt this Period
4670.45

Memo Item
JFC Transfer

SUBTOTAL of Receipts This Page (optional).....	9205.11
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 8 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Spencer, Richard, F, ,

Mailing Address 5286 E Home Ave

City Fresno	State CA	Zip Code 93727
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Spencer Enterprises	Occupation (for Individual) Developer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2022

Transaction ID : SA12.4571.0

Amount of Each Receipt this Period
5000.00

Memo Item
JFC Attribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BUDD NC VICTORY FUND

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55995.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA12.4581

Amount of Each Receipt this Period
41989.48

Memo Item
JFC Tranfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Klingenstein, Thomas, , ,

Mailing Address 1410 Broadway #3

City New York	State NY	Zip Code 10018
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cohen Klingenstein LLC	Occupation (for Individual) Investment Counselor
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2022

Transaction ID : SA12.4581.0

Amount of Each Receipt this Period
5000.00

Memo Item
JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	41989.48
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 9 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. Carroll, Roy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 N Elm St
 City Greensboro State NC Zip Code 27401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Carroll Companies Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 22 / 2022
Transaction ID : SA12.4581.1
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

B. Carroll, Vanessa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 N Elm St
 City Greensboro State NC Zip Code 27401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 23 / 2022
Transaction ID : SA12.4581.2
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

C. Hegyi, Albert, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 795 Hulls Farm Rd
 City Fairfield State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1st Financial Bank Occupation (for Individual) Banker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2022
Transaction ID : SA12.4581.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	0.00
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 10 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. Buckley, Walter, W, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11450 Turtle Beach Rd
 City N Palm Beach State FL Zip Code 33408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2022
Transaction ID : SA12.4581.4
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 JFC Attribution

B. Buckley, Marjorie, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11450 Turtle Beach Rd
 City N Palm Beach State FL Zip Code 33408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2022
Transaction ID : SA12.4581.5
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 JFC Attribution

C. Langone, Elaine, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Sands Point Rd
 City Sands Point State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2022
Transaction ID : SA12.4581.6
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	0.00
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 11 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. Langone, Kenneth, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 375 Park Ave
 City New York State NY Zip Code 10152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invemed Associates LLC Occupation (for Individual) Businessman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 29 / 2022
Transaction ID : SA12.4581.7
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

B. Kennelly, Kevin, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2325 Thetford Ct
 City Charlotte State NC Zip Code 28211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2022
Transaction ID : SA12.4581.8
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

C. BUDD NC VICTORY FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 97275
 City RALEIGH State NC Zip Code 27624
 FEC ID number of contributing federal political committee. **C** C00817510
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 66777.63

Date of Receipt 09 / 19 / 2022
Transaction ID : SA12.4574
 Amount of Each Receipt this Period 10782.00
 Memo Item
 JFC Transfer

SUBTOTAL of Receipts This Page (optional).....	10782.00
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 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. Smith, Eddie, C, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1527
 City Greenville State NC Zip Code 27835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Grady-White Boats Occupation (for Individual) Owner/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 09 / 02 / 2022
Transaction ID : SA12.4574.0
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC Attributions

B. Childs, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Sago Palm Rd Ste 701
 City Vero Beach State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JW Childs Associates Occupation (for Individual) Investments
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2022
Transaction ID : SA12.4574.1
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

C. Rawl, Julian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 543 Magnolia Creek Dr
 City Greenville State NC Zip Code 27834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Preston Development Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 06 / 2022
Transaction ID : SA12.4574.2
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. BUDD NC VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
67772.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2022

Transaction ID : SA12.4601

Amount of Each Receipt this Period
995.11

Memo Item
JFC TRANSFER

B. Pitts, Rodney, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 E 4th St Ste 100

City Charlotte	State NC	Zip Code 28202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Southern Elevator Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2022

Transaction ID : SA12.4601.0

Amount of Each Receipt this Period
1000.00

Memo Item
JFC ATTRIBUTION

C. BUDD NC VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
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FEC ID number of contributing federal political committee. **C** C00817510

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
77670.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : SA12.4615

Amount of Each Receipt this Period
9898.18

Memo Item
JFC Transfer

SUBTOTAL of Receipts This Page (optional).....	10893.29
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 14 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Old North State PAC

A. Hinman, Roy, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Arricola Ave
 City St Augustine State FL Zip Code 32080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Island Doctors Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2022
Transaction ID : SA12.4615.0
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 JFC Attribution

B. Beren, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1739 Duckcross Cove
 City Wichita State KS Zip Code 67206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEREXCO LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2022
Transaction ID : SA12.4615.1
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 JFC Attribution

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)

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

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	72869.88

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

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

FOR LINE NUMBER: PAGE 15 OF 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEAN FOR CONGRESS INC

Mailing Address **PO BOX 999**

City **EDISON** State **NJ** Zip Code **08818**

FEC ID number of contributing federal political committee. **C C00703058**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

Date of Receipt
07 / 15 / 2022

Transaction ID : SA16.4622

Amount of Each Receipt this Period
100.00

Memo Item
 Contribution Refund

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	100.00

**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"/> 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)
Old North State PAC

Full Name (Last, First, Middle Initial) A. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 08 / 17 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4666 Amount of Each Disbursement this Period [] 571.45	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement PAC Accounting Services		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 09 / 02 / 2022	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4667 Amount of Each Disbursement this Period [] 202.60	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement PAC Accounting Services		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/Type []
Purpose of Disbursement		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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 774.05
TOTAL This Period (last page this line number only).....▶	[] 774.05

**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 checked="" type="checkbox"/> 23	<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)
Old North State PAC

A. BRIAN FITZPATRICK FOR ALL OF US

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 939

M M M	/	D D D	/	Y Y Y Y Y
09		29		2022

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

Purpose of Disbursement Contribution

C	C00607416
---	-----------

Candidate Name
FITZPATRICK, BRIAN, , ,

Category/Type

Transaction ID : SB23.4662

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: PA District: 01

3000.00

Memo Item

B. BRITT FOR ALABAMA INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3759

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City MONTGOMERY State AL Zip Code 36109

FEC Identification Number

Purpose of Disbursement Contribution

C	C00781443
---	-----------

Candidate Name
BRITT, KATIE BOYD, , ,

Category/Type

Transaction ID : SB23.4656

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: AL District: 00

5000.00

Memo Item

C. BRUCE POLIQUIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 524

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City BANGOR State ME Zip Code 04402

FEC Identification Number

Purpose of Disbursement Contribution

C	C00788968
---	-----------

Candidate Name
POLIQUIN, BRUCE, , ,

Category/Type

Transaction ID : SB23.4651

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: District:

3000.00

Memo Item

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

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

11000.00

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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 checked="" type="checkbox"/> 23	<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)
Old North State PAC

Full Name (Last, First, Middle Initial) A. DOCTOR OZ FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 15 / 2022
Mailing Address 2771 PHILMONT AVE		FEC Identification Number C00795930 Transaction ID : SB23.4631 Amount of Each Disbursement this Period 5000.00
City HUNTINGDON VALLEY	State PA	Zip Code 19006
Purpose of Disbursement Contribution		Category/ Type
Candidate Name OZ, MEHMET DR., , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 00	

Full Name (Last, First, Middle Initial) B. FRIENDS OF TODD YOUNG, INC.		Date of Disbursement MM / DD / YYYY 09 / 27 / 2022
Mailing Address PO BOX 3743		FEC Identification Number C00459255 Transaction ID : SB23.4648 Amount of Each Disbursement this Period 5000.00
City CARMEL	State IN	Zip Code 46082
Purpose of Disbursement Contribution		Category/ Type
Candidate Name YOUNG, TODD CHRISTOPHER, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IN	District: 00	

Full Name (Last, First, Middle Initial) C. JD VANCE FOR SENATE INC.		Date of Disbursement MM / DD / YYYY 09 / 27 / 2022
Mailing Address PO BOX 6564		FEC Identification Number C00783142 Transaction ID : SB23.4638 Amount of Each Disbursement this Period 5000.00
City CINCINNATI	State OH	Zip Code 45206
Purpose of Disbursement Contribution		Category/ Type
Candidate Name VANCE, J D, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OH	District: 00	

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

15000.00

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 checked="" type="checkbox"/> 23	<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)
Old North State PAC

A. KANSANS FOR MARSHALL

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1588

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement Contribution

Candidate Name
MARSHALL, ROGER W, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: KS District: 01

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2022

FEC Identification Number

C C00576173

Transaction ID : **SB23.4629**
Amount of Each Disbursement this Period

5000.00

Memo Item

B. LAXALT FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 751102

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement Contribution

Candidate Name
LAXALT, ADAM, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NV District: 00

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2022

FEC Identification Number

C C00787135

Transaction ID : **SB23.4653**
Amount of Each Disbursement this Period

5000.00

Memo Item

C. MARCO RUBIO FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement Contribution

Candidate Name
RUBIO, MARCO, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: FL District: 00

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2022

FEC Identification Number

C C00620518

Transaction ID : **SB23.4645**
Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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 checked="" type="checkbox"/> 23	<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)
Old North State PAC

A. MIKE GARCIA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9070 IRVINE CENTER DRIVE #150

M M M	/	D D D	/	Y Y Y Y Y
09		29		2022

City IRVINE State CA Zip Code 92618

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00701102
---	-----------

Candidate Name
GARCIA, MICHAEL, , ,

Category/
Type

Transaction ID : **SB23.4659**

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: CA District: 27

5000.00

Memo Item

B. TEAM HERSCHEL, INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 501707

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

City ATLANTA State GA Zip Code 31150

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00787853
---	-----------

Candidate Name
WALKER, HERSCHEL MR., , ,

Category/
Type

Transaction ID : **SB23.4637**

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: GA District: 00

5000.00

Memo Item

C. THE PAT HARRIGAN COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 97275

M M M	/	D D D	/	Y Y Y Y Y
08		15		2022

City RALEIGH State NC Zip Code 27624

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00802298
---	-----------

Candidate Name
HARRIGAN, PAT, , ,

Category/
Type

Transaction ID : **SB23.4623**

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: NC District: 14

4000.00

Memo Item

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

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

14000.00

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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 checked="" type="checkbox"/> 23	<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)
Old North State PAC

Full Name (Last, First, Middle Initial)
A. TIM SCOTT FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

Mailing Address 1405 ASHLEY RIVER RD

FEC Identification Number

C C00540302

Transaction ID : SB23.4641

Amount of Each Disbursement this Period

5000.00

Memo Item

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
Contribution

Category/Type

Candidate Name
SCOTT, TIMOTHY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: SC District: 01

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2022

Mailing Address PO BOX 1597

FEC Identification Number

C C00778159

Transaction ID : SB23.4625

Amount of Each Disbursement this Period

5000.00

Memo Item

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contribution

Category/Type

Candidate Name
ZINKE, RYAN, K, ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MT District: 01

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

Date of Disbursement

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

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

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

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

10000.00

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

65000.00