Image# 12971396322 PAGE 1 / 8

# **FEC** FORM 3X

# REPORT OF RECEIPTS **AND DISBURSEMENTS**

· · · · · · ·	or Other Than An Autr	iorizea Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
North Carolina Medical	Society Federal Poli	tical Education and Act	ion Committee
ADDRESS (number and street)	PO Box 25834		
Check if different	222 N. Person Street		
than previously reported. (ACC)	Raleigh		NC 27611 -
2. FEC IDENTIFICATION NU	JMBER ▼ CIT	Y <b>A</b>	STATE ▲ ZIP CODE ▲
C C00003152	3. IS	THIS EPORT X NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (M5)	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	20 (M3) Jun 20 (M6)	(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	PRF-Flection	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	Fleeties	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	n on/	in the State of
5. Covering Period 04		through 06	30 / 2012
I certify that I have examined thi	is Report and to the best of	my knowledge and belief it is to	rue, correct and complete.
Type or Print Name of Treasurer	Asst Treasurer Stephen W. I	Keene	
Signature of Treasurer Asst 7	Freasurer Stephen W. Keene	[Electronically Filed]	Date 07 11 2012
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### North Carolina Medical Society Federal Political Education and Action Committee

06 30 2012 Report Covering the Period: 2012 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33516.15 January 1, 2012 (b) Cash on Hand at 18422.51 Beginning of Reporting Period..... 25378.86 5222.50 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 23645.01 58895.01 6(a) and 6(c) for Column B)..... 1.00 35251.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 23644.01 23644.01 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

For further information contact:

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

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. 06/2004)

Write or Type Committee Name

### North Carolina Medical Society Federal Political Education and Action Committee

I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	2750.00	12150.00
(i) iternized (use schedule A)		
(ii) Unitemized	2470.00	9220.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	5220.00	21370.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	4000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	5220.00	25370.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
Ē	0.00	
All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	2.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	2.50	6.86
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
	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
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	5222.50	25378.86
Total Federal Receipts		

#### **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
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I Clicu	Calendar Tear-to-Date
	(i) Federal Share	0.00	0.00
	(i) Tederal Orlare		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	100	4.00
	Expenditures (c) Total Operating Expenditures	1.00	1.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	1.00	1.00
	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
	Independent Expenditures	0.00	0.00
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	(use scriedule 1)		
	Loan Repayments Made	0.00	0.00
	Lagra Mada	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	0.00	35250.00
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	7	
	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
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1.00	35251.00
		7	
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	1.00	35251.00
	from Line 31)	1.00	35251.00

#### **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)	5220.00	25370.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5220.00	25370.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1.00	1.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1.00	-1.00

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

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

FOR LINE NUMBER:					PAGE	=	6	OF	8	
(c	he	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Full Name (Last, First, Middle Initial)  Dr. Joseph Guarino  Mailing Address 217 Turner Drive  Ste A  City  Reidsville  FEC ID number of contributing federal political committee.  Name of Employer  Piedmont Occupational & Urgent Care  Receipt For:  Primary  General  Other (specify)   Full Name (Last, First, Middle Initial)	Date of Receipt  M M M
Full Name (Last, First, Middle Initial)	Date of Receipt
Mailing Address 3714 Guardian Avenue Suite E  City  Morehead City  FEC ID number of contributing federal political committee.  Name of Employer Carteret Surgical Associates, PA  Receipt For:  Primary  Other (specify) ▼   State Zip Code NC 28557-4322  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.14598  Amount of Each Receipt this Period  250.00  Voluntary member contribution
Full Name (Last, First, Middle Initial) Dr. John Porter Roberson  Mailing Address 428 Meyer Farm Drive  City State Zip Code Pinehurst NC 28374  FEC ID number of contributing federal political committee.  Name of Employer Pinehurst Radiology  Receipt For: Primary General Other (specify)   Aggregate Year-to-Date   250.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)	1000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:				PAGE	7	OF	8	
(che	ck only	or	ne)					
×	11a		11b		11c	12		
	13		14		15	16	;	17

	Statements may not be sold or used by any persite name and address of any political committee to	
NAME OF COMMITTEE (In Full)	/ Fodovol Dollates I Fotovol   1.4	otion Committee
/ Νοπη Carolina Medical Society	Federal Political Education and A	Cuon Committee
Full Name (Last, First, Middle Initial)  Dr. John Gardiner Richard Roddey		Date of Receipt
Mailing Address 2015 Randolph Road Suite 208		05 21 2012
City	State Zip Code	Transaction ID : SA11AI.14593
Charlotte	NC 28207-1200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Charlotte Gastro & Hep	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  3. Dr. Judith Dirocco Sears		Date of Receipt
Mailing Address PO Box 30337		04 25 2012
City	State Zip Code	Transaction ID : SA11AI.14575
Winston Salem	NC 27130-0337	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Piedmont Radiation Oncology- Winston-S	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Dr. Victor W. Sears Jr.		Date of Receipt
Mailing Address 2025 Frontis Plaza Boulevar Suite 200		04 23 2012
City	State Zip Code	Transaction ID : SA11AI.14576
Winston Salem	NC 27103-5663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Digestive Health Specialists	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
	<u>-</u> _	
TOTAL This Period (last page this line number	r only)	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

	FOR LIN	PAGE	: 8	OF	8		
(check only one)							
	<b>X</b> 11a	11	b	11c		12	
	13	14		15		16	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.

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Medical Socie	ty Federal Political Education and A	action Committee
Full Name (Last, First, Middle Initial)  A. Matthew Tsuei		Date of Receipt
Mailing Address 1002 North Church Street Suite 302		04 26 2012
City Greensboro	State Zip Code NC 27401	Transaction ID : SA11AI.14577  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Central Carolina Surgery, PA	Occupation Physician	Voluntary member contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  3. Dr. William Alfred Walker  Mailing Address 2015 Randolph Road		Date of Receipt
Suite 201	State Zip Code	05 21 2012 Transaction ID : SA11AI.14594
Charlotte  FEC ID number of contributing federal political committee.	NC 28207-1200	Amount of Each Receipt this Period 250.00
Name of Employer Charlotte Colon & Rectal Surgery Assoc	Occupation Physician	Voluntary member contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line numb	per only)	2750.00