

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

ADDRESS (number and street) 115 Apollo Dr.
 Check if different than previously reported. (ACC)
Cape Carteret NC 28584

2. **FEC IDENTIFICATION NUMBER** C00250589
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2006 through 09 30 2006

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 Steve Malay

Signature of Treasurer Electronically Filed by Steve Malay Date 10 09 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		7314.07
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	12514.60									
(c) Total Receipts (from Line 19)	14667.69	23232.19								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27182.29	30546.26								
7. Total Disbursements (from Line 31)	23509.67	26873.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3672.62	3672.62								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	4143.28	4509.28
(i) Itemized (use Schedule A)	10104.00	17755.50
(ii) Unitemized	14247.28	22264.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)	420.41	967.41
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	14667.69	23232.19
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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 Transfer (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))	14667.69	23232.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14667.69	23232.19

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	23509.67	26873.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	23509.67	26873.64
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 Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	23509.67	26873.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	23509.67	26873.64

DETAILED SUMMARY PAGE
of Disbursements

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)	14667.69	23232.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14667.69	23232.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23509.67	26873.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23509.67	26873.64

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 33
	<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

A. Full Name (Last, First, Middle Initial) Dan Beall		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 109 Quork Ct.		Transaction ID: SA11A1.5202	
City State Zip Code Kill Devil Hills NC 27948		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		raffle/dinner ticket purchase	
Name of Employer retired Occupation retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.00	

B. Full Name (Last, First, Middle Initial) Dan Beall		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 109 Quork Ct.		Transaction ID: SA11A1.5371	
City State Zip Code Kill Devil Hills NC 27948		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		addnt'l drawing chance	
Name of Employer retired Occupation retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00	

C. Full Name (Last, First, Middle Initial) Dan Beall		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006	
Mailing Address 109 Quork Ct.		Transaction ID: SA11A1.5436	
City State Zip Code Kill Devil Hills NC 27948		Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		50-50 chance	
Name of Employer retired Occupation retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	115.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 33
	<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. Full Name (Last, First, Middle Initial) Dan Beall		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 109 Quork Ct.		Transaction ID: SA11A1.5477	
City Kill Devil Hills	State NC	Amount of Each Receipt this Period 50.00	
Zip Code 27948		pass the hat @ meetings	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

B. Full Name (Last, First, Middle Initial) Leon Bonner		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 211 Avalon La.		Transaction ID: SA11A1.5204	
City Greenville	State NC	Amount of Each Receipt this Period 100.00	
Zip Code 27858		raffle/dinner ticket purchase	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

C. Full Name (Last, First, Middle Initial) Leon Bonner		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 211 Avalon La.		Transaction ID: SA11A1.5372	
City Greenville	State NC	Amount of Each Receipt this Period 5.00	
Zip Code 27858		addnt'l drawing chance	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional)	155.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 33
	<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. Full Name (Last, First, Middle Initial) Leon Bonner		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 211 Avalon La.		Transaction ID: SA11A1.5479	
City Greenville	State NC	Amount of Each Receipt this Period 20.00	
Zip Code 27858		pass the hat @ meetings	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

B. Full Name (Last, First, Middle Initial) George Cleveland		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 224 Campbell Place		Transaction ID: SA11A1.5213	
City Jacksonville	State NC	Amount of Each Receipt this Period 500.00	
Zip Code 28546		raffle/dinner ticket purchase	
FEC ID number of contributing federal political committee. C			
Name of Employer State of NC	Occupation Rep. in NC House		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.00		

C. Full Name (Last, First, Middle Initial) George Cleveland		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 224 Campbell Place		Transaction ID: SA11A1.5480	
City Jacksonville	State NC	Amount of Each Receipt this Period 70.00	
Zip Code 28546		pass the hat @ meetings	
FEC ID number of contributing federal political committee. C			
Name of Employer State of NC	Occupation Rep. in NC House		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 855.00		

SUBTOTAL of Receipts This Page (optional)	590.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 33
	<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. Full Name (Last, First, Middle Initial)
Jerry Crain

Mailing Address 767 Simpson Rd.

City Elizabeth City State NC Zip Code 27909

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

Name of Employer ret'd Occupation ret'd

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5383

Amount of Each Receipt this Period
5.00

addn'tl drawing chance

B. Full Name (Last, First, Middle Initial)
Jerry Crain

Mailing Address 767 Simpson Rd.

City Elizabeth City State NC Zip Code 27909

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

Name of Employer ret'd Occupation ret'd

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2006

Transaction ID: SA11A1.5444

Amount of Each Receipt this Period
50.00

50-50 chance

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

Mailing Address 121 Mellen Rd.

City New Bern State NC Zip Code 28562

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 ▼ 375.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5220

Amount of Each Receipt this Period
200.00

raffle/dinner ticket purchase

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 33
	<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. Full Name (Last, First, Middle Initial)
Lucille Dicktel

Mailing Address 121 Mellen Rd.

City State Zip Code
New Bern NC 28562

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 ▼ 385.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5384

Amount of Each Receipt this Period
10.00

addnt'l drawing chance

B. Full Name (Last, First, Middle Initial)
Lucille Dicktel

Mailing Address 121 Mellen Rd.

City State Zip Code
New Bern NC 28562

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 ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2006

Transaction ID: SA11A1.5445

Amount of Each Receipt this Period
15.00

50-50 chance

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

Mailing Address 121 Mellen Rd.

City State Zip Code
New Bern NC 28562

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 ▼ 410.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2006

Transaction ID: SA11A1.5483

Amount of Each Receipt this Period
10.00

pass the hat @ meetings

SUBTOTAL of Receipts This Page (optional)	▶	35.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 33
	<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

Full Name (Last, First, Middle Initial) A. Sandra Duckwall		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 102 Smith Dr.		Transaction ID: SA11A1.5221	
City Camden	State NC	Zip Code 27921	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		raffle/dinner ticket purchase	
Name of Employer CACI Systems	Occupation Mgmt. analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00		

Full Name (Last, First, Middle Initial) B. Sandra Duckwall		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 102 Smith Dr.		Transaction ID: SA11A1.5385	
City Camden	State NC	Zip Code 27921	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		addn'tl drawing chance	
Name of Employer CACI Systems	Occupation Mgmt. analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

Full Name (Last, First, Middle Initial) C. Sandra Duckwall		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006	
Mailing Address 102 Smith Dr.		Transaction ID: SA11A1.5446	
City Camden	State NC	Zip Code 27921	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C		50-50 chance	
Name of Employer CACI Systems	Occupation Mgmt. analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00		

SUBTOTAL of Receipts This Page (optional) ▶	215.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 33
	<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. Full Name (Last, First, Middle Initial)
Linda Foreman

Mailing Address 243 Forte Shores Dr.

City State Zip Code
Chocowinity NY 27817

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

Name of Employer NV Vocat. Rehab Occupation office asst.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5386

Amount of Each Receipt this Period
20.00

addn'tl drawing chance

B. Full Name (Last, First, Middle Initial)
Steve Griffin

Mailing Address 1989 W. 5th St.

City State Zip Code
Washington NC 27889

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

Name of Employer self Occupation hunting supplies store

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5560

Amount of Each Receipt this Period
270.00

In-kind - contrib.of door prize items

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

Mailing Address 117 Clubhouse Dr.

City State Zip Code
Cape Carteret NC 28584

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 ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5224

Amount of Each Receipt this Period
100.00

raffle/dinner ticket purchase

SUBTOTAL of Receipts This Page (optional)	390.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 33
	<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. Full Name (Last, First, Middle Initial)
Jan Grube

Mailing Address 117 Clubhouse Dr.

City State Zip Code
Cape Carteret NC 28584

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 ▼ 230.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5389

Amount of Each Receipt this Period
5.00

addn'tl drawing chance

B. Full Name (Last, First, Middle Initial)
Jan Grube

Mailing Address 117 Clubhouse Dr.

City State Zip Code
Cape Carteret NC 28584

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 ▼ 245.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2006

Transaction ID: SA11A1.5486

Amount of Each Receipt this Period
15.00

pass the hat @ meetings

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

Mailing Address 1830 Blue Banks Farm Rd.

City State Zip Code
Greenville NC 27834

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

Name of Employer Camp Don Lee Occupation outdoor educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5227

Amount of Each Receipt this Period
200.00

raffle/dinner ticket purchase

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 33
	<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

Full Name (Last, First, Middle Initial) A. Curt Hendrix		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1830 Blue Banks Farm Rd.		Transaction ID: SA11A1.5392
City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		addnt'l drawing chance
Name of Employer Camp Don Lee	Occupation outdoor educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

Full Name (Last, First, Middle Initial) B. Curt Hendrix		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1830 Blue Banks Farm Rd.		Transaction ID: SA11A1.5554
City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. C		In-kind - contrib.of door prize items
Name of Employer Camp Don Lee	Occupation outdoor educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00	

Full Name (Last, First, Middle Initial) C. Curt Hendrix		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006
Mailing Address 1830 Blue Banks Farm Rd.		Transaction ID: SA11A1.5449
City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		50-50 chance
Name of Employer Camp Don Lee	Occupation outdoor educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00	

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 33
	<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. Full Name (Last, First, Middle Initial) Curt Hendrix Mailing Address 1830 Blue Banks Farm Rd. City State Zip Code Greenville NC 27834 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006 Transaction ID: SA11A1.5487 Amount of Each Receipt this Period 17.00 pass the hat @ meetings
Name of Employer Occupation Camp Don Lee outdoor educator Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 408.00		

B. Full Name (Last, First, Middle Initial) Kim Hendrix Mailing Address 1830 Blue Banks Farm Rd. City State Zip Code Greenville NC 27834 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006 Transaction ID: SA11A1.5228 Amount of Each Receipt this Period 200.00 raffle/dinner ticket purchase
Name of Employer Occupation Productions by Kim event planner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 380.00		

C. Full Name (Last, First, Middle Initial) Kim Hendrix Mailing Address 1830 Blue Banks Farm Rd. City State Zip Code Greenville NC 27834 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006 Transaction ID: SA11A1.5391 Amount of Each Receipt this Period 20.00 addnt'l drawing chance
Name of Employer Occupation Productions by Kim event planner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	237.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 33
	<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. Full Name (Last, First, Middle Initial) Kim Hendrix Mailing Address 1830 Blue Banks Farm Rd City Greenville State NC Zip Code 27834 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.5556 Amount of Each Receipt this Period 55.00 In-kind - contrib.of door prize items
Name of Employer Productions by Kim Occupation event planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

B. Full Name (Last, First, Middle Initial) Kim Hendrix Mailing Address 1830 Blue Banks Farm Rd City Greenville State NC Zip Code 27834 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.5488 Amount of Each Receipt this Period 20.00 pass the hat @ meetings
Name of Employer Productions by Kim Occupation event planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C. Full Name (Last, First, Middle Initial) Edella Johnson Mailing Address 3500 Cranberry La. City New Bern State NC Zip Code 28562 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.5547 Amount of Each Receipt this Period 183.00 In-kind - contrib.of door prize items
Name of Employer retired Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.00	

SUBTOTAL of Receipts This Page (optional)	258.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 33
	<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. Full Name (Last, First, Middle Initial)
Edella Johnson

Mailing Address 3500 Cranberry La.

City State Zip Code
New Bern NC 28562

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 ▼ 350.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2006

Transaction ID: SA11A1.5489

Amount of Each Receipt this Period
6.00

pass the hat @ meetings

B. Full Name (Last, First, Middle Initial)
Steve Malay

Mailing Address 115 Apollo Dr.

City State Zip Code
Cape Carteret NC 28584

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
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5235

Amount of Each Receipt this Period
100.00

raffle/dinner ticket purchase

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

Mailing Address 115 Apollo Dr.

City State Zip Code
Cape Carteret NC 28584

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 ▼ 230.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.5400

Amount of Each Receipt this Period
20.00

addnt'l drawing chance

SUBTOTAL of Receipts This Page (optional)	▶	126.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 33
	<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. Full Name (Last, First, Middle Initial)
Steve Malay

Mailing Address 115 Apollo Dr.

City State Zip Code
Cape Carteret NC 28584

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 ▼ 235.28

Date of Receipt
MM / DD / YYYY
09 / 11 / 2006

Transaction ID: SA11A1.5493

Amount of Each Receipt this Period
5.28

pass the hat @ meetings

B. Full Name (Last, First, Middle Initial)
Ann Martin

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 retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5237

Amount of Each Receipt this Period
50.00

raffle/dinner 1/2 tick-
et purchase

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

Mailing Address 11 Castle Lane

City State Zip Code
Washington NC 27889

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

Name of Employer ADMIX Agency Occupation advertising consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 284.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.5242

Amount of Each Receipt this Period
100.00

raffle/dinner ticket pur-
chase

SUBTOTAL of Receipts This Page (optional)	▶	155.28
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 33
	<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. Pamela Nuckols		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 11 Castle Lane		Transaction ID: SA11A1.5407
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		addnt'l drawing chance
Name of Employer ADMIX Agency	Occupation advertising consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00	

Full Name (Last, First, Middle Initial) B. Pamela Nuckols		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006
Mailing Address 11 Castle Lane		Transaction ID: SA11A1.5456
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		50-50 chance
Name of Employer ADMIX Agency	Occupation advertising consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.00	

Full Name (Last, First, Middle Initial) C. Jean Preston		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 211 Pompano		Transaction ID: SA11A1.5412
City State Zip Code Emerald Isle NC 28594	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		addnt'l drawing chance
Name of Employer NC	Occupation Representative NC House	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional) ▶	80.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 33
	<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

Full Name (Last, First, Middle Initial) A. Jean Preston		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006	
Mailing Address 211 Pompano		Transaction ID: SA11A1.5457	
City State Zip Code Emerald Isle NC 28594	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	50-50 chance		
Name of Employer Occupation NC Representative NC House	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Bob Pruett		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address PO Box 695		Transaction ID: SA11A1.5248	
City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	raffle/dinner ticket purchase		
Name of Employer Occupation Pruett Rentals self-employed	Aggregate Year-to-Date ▼ 290.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Bob Pruett		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address PO Box 695		Transaction ID: SA11A1.5413	
City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	addnt'l drawing chance		
Name of Employer Occupation Pruett Rentals self-employed	Aggregate Year-to-Date ▼ 310.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	140.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 33
	<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. Full Name (Last, First, Middle Initial) Bob Pruett		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 6
Mailing Address PO Box 695		Transaction ID: SA11A1.5458
City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	50-50 chance	
Name of Employer Pruett Rentals	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

B. Full Name (Last, First, Middle Initial) Bob Pruett		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address PO Box 695		Transaction ID: SA11A1.5495
City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C	pass the hat @ meetings	
Name of Employer Pruett Rentals	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

C. Full Name (Last, First, Middle Initial) Rachel Sturz		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 116 Oxford Rd.		Transaction ID: SA11A1.5562
City State Zip Code Greenville NC 27858	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	In-kind - contrib. of door prize items	
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 33
	<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

Full Name (Last, First, Middle Initial) A. Ann Sullivan		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 103 Wildwood Dr.		Transaction ID: SA11A1.5552	
City State Zip Code Goldsboro NC 27530	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. C	In-kind - contrib. of door prize items		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 239.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ann Sullivan		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 103 Wildwood Dr.		Transaction ID: SA11A1.5498	
City State Zip Code Goldsboro NC 27530	Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C	pass the hat @ meetings		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 241.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ellen Toppin		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 328 S. Wedgewood Dr.		Transaction ID: SA11A1.5255	
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C	raffle/dinner ticket purchase		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 460.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	517.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 33
	<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. Ellen Toppin		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 328 S. Wedgewood Dr.		Transaction ID: SA11A1.5424	
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	addn'tl drawing chance		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 470.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ellen Toppin		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 328 S. Wedgewood Dr.		Transaction ID: SA11A1.5558	
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	In-kind - contrib.of door prize items		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 490.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ellen Toppin		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2006	
Mailing Address 328 S. Wedgewood Dr.		Transaction ID: SA11A1.5469	
City State Zip Code Washington NC 27889	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	50-50 chance		
Name of Employer retired Occupation retired	Aggregate Year-to-Date ▼ 510.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 33
	<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. Full Name (Last, First, Middle Initial) Ron Toppin Mailing Address 328 Wedgewood Dr. City Washington State NC Zip Code 27889 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6 Transaction ID: SA11A1.5256 Amount of Each Receipt this Period 200.00 raffle/dinner ticket purchase
Name of Employer Trucking co. Occupation operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

B. Full Name (Last, First, Middle Initial) Ron Toppin Mailing Address 328 Wedgewood Dr. City Washington State NC Zip Code 27889 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.5426 Amount of Each Receipt this Period 10.00 addnt'l drawing chance
Name of Employer Trucking co. Occupation operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C. Full Name (Last, First, Middle Initial) Ron Toppin Mailing Address 328 Wedgewood Dr. City Washington State NC Zip Code 27889 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.5500 Amount of Each Receipt this Period 20.00 pass the hat @ meetings
Name of Employer Trucking co. Occupation operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	230.00
TOTAL This Period (last page this line number only)	4143.28

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 33
	(check only one)	
<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. Full Name (Last, First, Middle Initial)
First District NC GOP

Mailing Address 1200 Muriel St.

City State Zip Code
Goldsboro NC 27530

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.41

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2006

Transaction ID: SA11B.5508

Amount of Each Receipt this Period
340.41

reconciliation 1st/3rd Di-
st combd conv \$

B. Full Name (Last, First, Middle Initial)
Pitt County GOP

Mailing Address PO Box 8498

City State Zip Code
Greenville NC 27835

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
105.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11B.5567

Amount of Each Receipt this Period
80.00

In-kind -contrib.of door
prize items

SUBTOTAL of Receipts This Page (optional)	▶	420.41
TOTAL This Period (last page this line number only)	▶	420.41

**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. Adrain Arnett		Transaction ID: SB21B.5541 Date of Disbursement MM / DD / YYYY 09 / 13 / 2006	
Mailing Address 1285 Hwy 41N		Amount of Each Disbursement this Period 392.00	
City Pink Hill State NC Zip Code 28572	Purpose of Disbursement NC Senate campaign donation Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dan Beall		Transaction ID: SB21B.5526 Date of Disbursement MM / DD / YYYY 09 / 13 / 2006	
Mailing Address 109 Quork Ct.		Amount of Each Disbursement this Period 1316.00	
City Kill Devil Hills State NC Zip Code 27948	Purpose of Disbursement NC House campaign donation Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Harry Brown		Transaction ID: SB21B.5540 Date of Disbursement MM / DD / YYYY 09 / 13 / 2006	
Mailing Address 2223 N. Marine Blvd.		Amount of Each Disbursement this Period 1078.00	
City Jacksonville State NC Zip Code 28546	Purpose of Disbursement NC Senate campaign donation Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2786.00
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 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

A. Jimmy Chalmers Full Name (Last, First, Middle Initial) Mailing Address 6135 Huntsboro Rd. City Oxford State NC Zip Code 27565 Purpose of Disbursement drawing award winner Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5512 Date of Disbursement 08 / 18 / 2006 Amount of Each Disbursement this Period 1250.00 Category/Type
--	--	--

B. Wayne Clark Full Name (Last, First, Middle Initial) Mailing Address PO Box 848 City Ocracoke State NC Zip Code 27960 Purpose of Disbursement drawing award winner Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5520 Date of Disbursement 08 / 18 / 2006 Amount of Each Disbursement this Period 1250.00 Category/Type
---	--	--

C. George Cleveland Full Name (Last, First, Middle Initial) Mailing Address 224 Campbell Place City Jacksonville State NC Zip Code 28546 Purpose of Disbursement NC House campaign donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5535 Date of Disbursement 09 / 13 / 2006 Amount of Each Disbursement this Period 1400.00 Category/Type
--	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	3900.00
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 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. Bill Daughtridge		Transaction ID: SB21B.5536 Date of Disbursement 09 / 13 / 2006	
Mailing Address PO Box 593		Amount of Each Disbursement this Period 378.00	
City Rocky Mount State NC Zip Code 22222	Purpose of Disbursement NC House campaign donation	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Steve Griffin		Transaction ID: SB21B.5561 Date of Disbursement 08 / 18 / 2006	
Mailing Address 1989 W. 5th St.		Amount of Each Disbursement this Period 270.00	
City Washington State NC Zip Code 27889	Purpose of Disbursement In-kind - contrib.of door prize items	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Rich Kaiser		Transaction ID: SB21B.5528 Date of Disbursement 09 / 13 / 2006	
Mailing Address PO Box 641		Amount of Each Disbursement this Period 560.00	
City Faison State NC Zip Code 28341	Purpose of Disbursement NC House campaign donation	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	1208.00
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 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. Pat McElrath		Transaction ID: SB21B.5534 Date of Disbursement 09 / 13 / 2006	
Mailing Address 306 Governor Safford Lane		Amount of Each Disbursement this Period 812.00	
City Emerald Isle State NC Zip Code 28594	Purpose of Disbursement NC House campaign donation	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tony Moore		Transaction ID: SB21B.5530 Date of Disbursement 09 / 13 / 2006	
Mailing Address 214 W. Main St.		Amount of Each Disbursement this Period 700.00	
City Winterville State NC Zip Code 28590	Purpose of Disbursement NC House campaign donation	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Pamela Nuckols		Transaction ID: SB21B.5513 Date of Disbursement 08 / 18 / 2006	
Mailing Address 11 Castle Lane		Amount of Each Disbursement this Period 1250.00	
City Washington State NC Zip Code 27889	Purpose of Disbursement drawing award winner	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2762.00
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)

PAGE 30 / 33

<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

A. Louis Pate Full Name (Last, First, Middle Initial) Mailing Address 102 Meredith St. City Mt. Olive State NC Zip Code 28365 Purpose of Disbursement NC House campaign donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5532 Date of Disbursement 09 / 13 / 2006 Amount of Each Disbursement this Period 1008.00 Category/Type
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B. Jean Preston Full Name (Last, First, Middle Initial) Mailing Address 211 Pompano City Emerald Isle State NC Zip Code 28594 Purpose of Disbursement NC Senate campaign donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5538 Date of Disbursement 09 / 13 / 2006 Amount of Each Disbursement this Period 1092.00 Category/Type
--	--	--

C. Hood Richardson Full Name (Last, First, Middle Initial) Mailing Address 110 W. 2nd St. City Washington State NC Zip Code 27889 Purpose of Disbursement NC House campaign donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5529 Date of Disbursement 09 / 13 / 2006 Amount of Each Disbursement this Period 476.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	2576.00
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 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. Rock Springs Center		Transaction ID: SB21B.5522 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 500 Aaron Circle		Amount of Each Disbursement this Period 3013.97	
City Greenville State NC Zip Code 27834	Purpose of Disbursement Reverse drawing food & venue Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Todd Siebels		Transaction ID: SB21B.5539 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 426 Lee St.		Amount of Each Disbursement this Period 700.00	
City Greenville State NC Zip Code 27858	Purpose of Disbursement NC Senate campaign donation Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Speciale		Transaction ID: SB21B.5527 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 803 Stately Pines Rd.		Amount of Each Disbursement this Period 812.00	
City New Bern State NC Zip Code 28560	Purpose of Disbursement NC House campaign donation Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4525.97
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)

PAGE 32 / 33

<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. Willie Ray Starling		Transaction ID: SB21B.5531 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6
Mailing Address 1523 Indian Springs Rd.		Amount of Each Disbursement this Period 1316.00
City Mt. Olive State NC Zip Code 28365		
Purpose of Disbursement NC House campaign donation		Category/ Type
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:		

Full Name (Last, First, Middle Initial) B. Ellen Toppin		Transaction ID: SB21B.5514 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 328 S. Wedgewood Dr.		Amount of Each Disbursement this Period 1250.00
City Washington State NC Zip Code 27889		
Purpose of Disbursement drawing award winner		Category/ Type
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:		

Full Name (Last, First, Middle Initial) C. Ellen Toppin		Transaction ID: SB21B.5559 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 328 S. Wedgewood Dr.		Amount of Each Disbursement this Period 20.00
City Washington State NC Zip Code 27889		
Purpose of Disbursement In-kind - contrib.of door prize items		Category/ Type
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:		

SUBTOTAL of Disbursements This Page (optional) ▶	2586.00
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)

PAGE 33 / 33

<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

A. Full Name (Last, First, Middle Initial) Ron Toppin		Transaction ID: SB21B.5537 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 328 Wedgewood Dr.		Amount of Each Disbursement this Period 1330.00	
City Washington State NC Zip Code 27889	Purpose of Disbursement NC Senate campaign donation	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) John Wetherington		Transaction ID: SB21B.5533 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address PO Box 698		Amount of Each Disbursement this Period 630.00	
City Dover State NC Zip Code 28526	Purpose of Disbursement NC House campaign donation	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

1960.00

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

22303.97