

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Walker 4 NC

ADDRESS (number and street)

2941 Battleground Ave

Box 38334

☐ Check if different
than previously
reported. (ACC)

Greensboro

NC

27438

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00543231

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

NC

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Charles Rakestraw

Signature of Treasurer

Charles Rakestraw

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 49

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	37853.32	129527.80
(b) Total Contribution Refunds (from Line 20(d))	0.00	600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	37853.32	128927.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32973.74	118589.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	15.95	15.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	32957.79	118573.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9254.46	
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	

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 3 (Revised 12/2003)

PAGE 3 / 49

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

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

To:

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

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

31798.32

102498.32

(ii) Unitemized.....

6055.00

20142.00

(iii) TOTAL of contributions from individuals ▶

37853.32

122640.32

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

0.00

6887.48

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

37853.32

129527.80

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

15.95

15.95

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

0.00

0.00

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

37869.27

129543.75

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 49

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32973.74	118589.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	600.00
(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 20(a), (b), and (c)).....	0.00	600.00
21. OTHER DISBURSEMENTS	500.00	1100.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	33473.74	120289.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4858.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37869.27
25. SUBTOTAL (add Line 23 and Line 24).....	42728.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33473.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9254.46

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3N
Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Horace J Alligood

Mailing Address 6100 W Friendly Ave

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

10

18

2013

Transaction ID : SA11AI.5176

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Amy M Arthur

Mailing Address 6087 Grinsted Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

12

06

2013

Transaction ID : SA11AI.5309

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Rick Artiga

Mailing Address 1541 New Garden Rd
Apt 2B

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Meridian Associates

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

330.00

Date of Receipt

10

28

2013

Transaction ID : SA11AI.5181

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 7 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Rick Artiga

A.

Mailing Address 1541 New Garden Rd

Apt 2B

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Meridian Associates

Occupation
Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

430.00

Date of Receipt

M M / D D / Y Y Y Y
11 28 2013

Transaction ID : SA11AI.5291

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Rick Artiga

B.

Mailing Address 1541 New Garden Rd

Apt 2B

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Meridian Associates

Occupation
Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

530.00

Date of Receipt

M M / D D / Y Y Y Y
12 28 2013

Transaction ID : SA11AI.5353

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Bruce Ashley

C.

Mailing Address 807 Rollingwood Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Moore Leatherwood LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
11 11 2013

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period

1500.00

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 8 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Paul W Bailey

A.

Mailing Address 3402 Willow Grove Ct

City

Greensboro

State

NC

Zip Code

27410-8800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 05 / 2013

Transaction ID : SA11AI.5196

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Cynthia Bissette

B.

Mailing Address 3092 Terramar Dr

City

Naples

State

FL

Zip Code

34119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Property Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

620.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 04 / 2013

Transaction ID : SA11AI.5149

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Cynthia Bissette

C.

Mailing Address 3092 Terramar Dr

City

Naples

State

FL

Zip Code

34119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Property Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

920.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2013

Transaction ID : SA11AI.5188

Amount of Each Receipt this Period

300.00

1600.00

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

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Douglas A Blackman

Mailing Address 7088 Toscana Trce

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Carolina Surgery

Occupation

Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SA11AI.5168

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2013

Transaction ID : SA11AI.5186

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2013

Transaction ID : SA11AI.5292

Amount of Each Receipt this Period

25.00

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

150.00

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

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

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

FOR LINE NUMBER:

PAGE 10 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2013

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Heidi Brausch

Mailing Address 10064 Palsley Dr

City

Charlotte

State

NC

Zip Code

28269

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Herman Brown Jr.

Mailing Address 5595 County Road 18

City

Ozark

State

AL

Zip Code

36360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Construction

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

Transaction ID : SA11AI.5133

Amount of Each Receipt this Period

1100.00

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

1475.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
William J Bryan

Mailing Address 8203 Fox Briar Ct

City Greensboro State NC Zip Code 27455

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
620.00

Date of Receipt

M M / D D / Y Y Y Y
10 15 2013

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Flora C Carter

Mailing Address 5006 Heathridge Terrace

City Greensboro State NC Zip Code 27410-8418

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
345.00

Date of Receipt

M M / D D / Y Y Y Y
12 06 2013

Transaction ID : SA11AI.5315

Amount of Each Receipt this Period

25.00

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

Mailing Address 5006 Heathridge Ter

City Greensboro State NC Zip Code 27410

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
11 12 2013

Transaction ID : SA11AI.5249

Amount of Each Receipt this Period

250.00

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

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

375.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 49

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Benjamin Ryan Chandler

Mailing Address 56 Creswell Ct

City Greensboro State NC Zip Code 27407

FEC ID number of contributing federal political committee. C

Name of Employer BC Collections Occupation Owner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt

M M / D D / Y Y Y Y
12 31 2013

Transaction ID : SA11AI.5375

Amount of Each Receipt this Period

600.00

B. Full Name (Last, First, Middle Initial)
Ryan Chandler

Mailing Address 110-A Shorelake Dr

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt

M M / D D / Y Y Y Y
10 15 2013

Transaction ID : SA11AI.5193

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Larry L Cullen

Mailing Address 7115 W Friendly Ave Apt H

City Greensboro State NC Zip Code 27410-6275

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt

M M / D D / Y Y Y Y
10 15 2013

Transaction ID : SA11AI.5192

Amount of Each Receipt this Period

100.00

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

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

800.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Bonnie Edenfield			Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013	
Mailing Address 6118 Westwind Dr			Transaction ID : SA11AI.5214	
City	State	Zip Code		
Greensboro	NC	27410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Piedmont Baptist Association		Occupation Administrative Assistant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 275.00		
B. Full Name (Last, First, Middle Initial) Grey Ellis			Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2013	
Mailing Address 107 Kirk Rd			Transaction ID : SA11AI.5152	
City	State	Zip Code		
Greensboro	NC	27455		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed		Occupation Media Transfer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 510.00		
C. Full Name (Last, First, Middle Initial) Grey Ellis			Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 107 Kirk Rd			Transaction ID : SA11AI.5262	
City	State	Zip Code		
Greensboro	NC	27455		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed		Occupation Media Transfer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 760.00		
SUBTOTAL of Receipts This Page (optional).....			750.00	
TOTAL This Period (last page this line number only).....				

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Grey Ellis			Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 107 Kirk Rd			Transaction ID : SA11AI.5367	
City	State	Zip Code		
Greensboro	NC	27455		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed		Occupation Media Transfer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1010.00		
B. Full Name (Last, First, Middle Initial) Vic Flow			Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013	
Mailing Address 2755 Old Town Club Rd			Transaction ID : SA11AI.5244	
City	State	Zip Code		
Winston Salem	NC	27106		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Flow Lexus		Occupation Sales		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
C. Full Name (Last, First, Middle Initial) Sean Gilboy			Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address 114 Forest Lake Trl			Transaction ID : SA11AI.5366	
City	State	Zip Code		
Reidsville	NC	27320		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 50.00	
Name of Employer Liquip International		Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 245.00		
SUBTOTAL of Receipts This Page (optional).....			1300.00	
TOTAL This Period (last page this line number only).....				

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Richard B Graham

Mailing Address 111 Sawgrass Pl

City Greenwood State SC Zip Code 29649

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

Name of Employer Regional Medical Group Occupation Physician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
10 18 2013

Transaction ID : SA11AI.5172

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Stephanie F Graham

Mailing Address 111 Sawgrass Pl

City Greenwood State SC Zip Code 29649

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
10 18 2013

Transaction ID : SA11AI.5170

Amount of Each Receipt this Period

2600.00

C. Full Name (Last, First, Middle Initial)
Bret S Grieves

Mailing Address 2928 Round Hill Rd

City Greensboro State NC Zip Code 27408

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

Name of Employer Scott Insurance Occupation Risk Management & Insurance

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M / D D / Y Y Y Y
11 26 2013

Transaction ID : SA11AI.5263

Amount of Each Receipt this Period

1000.00

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

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

6200.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Lynn M Guthrie		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013	
Mailing Address 7 Orchard Grass Ct		Transaction ID : SA11AI.5215	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1440.00		

B. Full Name (Last, First, Middle Initial) Rick Haase		Date of Receipt M M / D D / Y Y Y Y 11 / 13 / 2013	
Mailing Address 1412 DeSoto Pl		Transaction ID : SA11AI.5255	
City Greensboro	State NC	Zip Code 27408	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lincoln Financial Group	Occupation Systems Specialist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

C. Full Name (Last, First, Middle Initial) Greg K Hampson		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 174 Lakewalk Dr		Transaction ID : SA11AI.5307	
City Reidsville	State NC	Zip Code 27320	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gilbarco Veeder-Root	Occupation Computer Programmer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 290.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 540.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Michael A Haran

Mailing Address 4312 E NC HWY 150

City

Browns Summit

State

NC

Zip Code

27214-9695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		07		2013

Transaction ID : SA11AI.5158

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Michael A Haran

Mailing Address 4312 E NC HWY 150

City

Browns Summit

State

NC

Zip Code

27214-9695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		01		2013

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Michael A Haran

Mailing Address 4312 E NC HWY 150

City

Browns Summit

State

NC

Zip Code

27214-9695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		01		2013

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period

25.00

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

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

150.00

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Bruce Hester		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2013	
Mailing Address 431 Faith Dr		Transaction ID : SA11AI.5191	
City Gibonsville	State NC		Zip Code 27249
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) B. Bruce Hester		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2013	
Mailing Address 431 Faith Dr		Transaction ID : SA11AI.5169	
City Gibonsville	State NC		Zip Code 27249
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 260.00	Amount of Each Receipt this Period 40.00	

Full Name (Last, First, Middle Initial) C. Joe Hill		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2013	
Mailing Address 3508 Vernon St		Transaction ID : SA11AI.5167	
City Greensboro	State NC		Zip Code 27408-2920
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1115.00	Amount of Each Receipt this Period 100.00	

SUBTOTAL of Receipts This Page (optional)	240.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Jeffrey Hyde
Mailing Address 200 East Newlyn Street

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee.

C

Name of Employer
Aesthetic Images

Occupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
12 16 2013

Transaction ID : SA11AI.5319

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Cheryl L Kingman
Mailing Address 223 Oakmont Dr

City Advance State NC Zip Code 27006

FEC ID number of contributing federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M / D D / Y Y Y Y
11 05 2013

Transaction ID : SA11AI.5203

Amount of Each Receipt this Period

400.00

C. Full Name (Last, First, Middle Initial)
Gil Kingman
Mailing Address 223 Oakmont Dr

City Advance State NC Zip Code 27006

FEC ID number of contributing federal political committee.

C

Name of Employer
Forsyth Plastic Surgery

Occupation
Plastic Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2100.00

Date of Receipt

M M / D D / Y Y Y Y
12 27 2013

Transaction ID : SA11AI.5368

Amount of Each Receipt this Period

2000.00

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

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

5000.00

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

Use separate schedule(s)
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Louis B Kunar			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 704 James Doak Pkwy			Transaction ID : SA11AI.5345	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Rubbermaid		Occupation Salesman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 220.00		
B. Full Name (Last, First, Middle Initial) Rachel B Lawrence			Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 123 Shorelake Dr Apt A			Transaction ID : SA11AI.5265	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 245.00		
C. Full Name (Last, First, Middle Initial) Rachel B Lawrence			Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 123 Shorelake Dr Apt A			Transaction ID : SA11AI.5282	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 270.00		
SUBTOTAL of Receipts This Page (optional).....			135.00	
TOTAL This Period (last page this line number only).....				

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

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Rachel B Lawrence

Mailing Address 123 Shorelake Dr

Apt A

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.5332

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Rachel B Lawrence

Mailing Address 123 Shorelake Dr

Apt A

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.5336

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Rachel B Lawrence

Mailing Address 123 Shorelake Dr

Apt A

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.5343

Amount of Each Receipt this Period

10.00

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

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

85.00

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

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial) A. Yvonne R Lowne		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 842 Creek Crossing Trail		Transaction ID : SA11AI.5146
City Stoney Creek	State NC	
Zip Code 27377		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cornerstone Medical	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. James W Maness Jr		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 7375 Doggett Rd		Transaction ID : SA11AI.4819
City Browns Summit	State NC	
Zip Code 27214-9583		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Fire Department	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00	

Full Name (Last, First, Middle Initial) C. Patricia J Marsh		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 214 Kirk Rd		Transaction ID : SA11AI.5209
City Greensboro	State NC	
Zip Code 27455-1717		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Robert A. J. McGrady

A.

Mailing Address 100 Pineburr Rd

City

Greensboro

State

NC

Zip Code

27455-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SA11AI.5175

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Carol M McKinney

B.

Mailing Address 3501 Brown Bark Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawndale Baptist Church

Occupation

Admin Assistant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

Transaction ID : SA11AI.5128

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Dennis F Moore

C.

Mailing Address 3714 Watauga Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : SA11AI.5273

Amount of Each Receipt this Period

150.00

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

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

350.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Pam Nester			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 5807 Stanley Huff Rd			Transaction ID : SA11AI.5348	
City Summerfield	State NC	Zip Code 27358	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2120.00		
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2120.00		
B. Full Name (Last, First, Middle Initial) Robin J Parker			Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2013	
Mailing Address 5908 Founders Dr			Transaction ID : SA11AI.5166	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00		
Name of Employer Apple, Koceja & Assoc., CPAs		Occupation Accountant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
C. Full Name (Last, First, Middle Initial) Arvil Pennington			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2013	
Mailing Address 3006 Edgewater Dr			Transaction ID : SA11AI.5121	
City Greensboro	State NC	Zip Code 27403	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00		
Name of Employer Lawndale Baptist Church		Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 225.00		
SUBTOTAL of Receipts This Page (optional).....			2300.00	
TOTAL This Period (last page this line number only).....			2300.00	

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

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Daniel Pierce

A.

Mailing Address 150 Dogwood Acres

City

Madison

State

NC

Zip Code

27025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pastor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SA11AI.5174

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Jeffrey D Plummer

B.

Mailing Address 2259 Barrowcliffe Dr

City

Concord

State

NC

Zip Code

28027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

Regional Vice President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1498.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2013

Transaction ID : SA11AI.5182

Amount of Each Receipt this Period

1498.32

In-kind - Catering

Full Name (Last, First, Middle Initial)

Nick I Quintana

C.

Mailing Address 1490 Bethan Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCB

Occupation

Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : SA11AI.5266

Amount of Each Receipt this Period

250.00

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

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

2748.32

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Susan Rakestraw			Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2013	
Mailing Address 208 Twin Creeks Dr			Transaction ID : SA11AI.5178	
City	State	Zip Code		
Stokesdale	NC	27357		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Deborah H Ratliff			Date of Receipt M M / D D / Y Y Y Y 12 / 07 / 2013	
Mailing Address 90 Heron's Bill Dr			Transaction ID : SA11AI.5361	
City	State	Zip Code		
Bluffton	SC	29909		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
C. Full Name (Last, First, Middle Initial) Thomas Riley			Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2013	
Mailing Address 1605 St Andrews Pl			Transaction ID : SA11AI.5227	
City	State	Zip Code		
Kinston	NC	28504		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Alliance One International		Occupation Business Relations Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....			1250.00	
TOTAL This Period (last page this line number only).....				

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

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

FOR LINE NUMBER:

PAGE 27 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Joe Robertson

Mailing Address 5904 Founders Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : SA11AI.4818

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Penni L Rogers

Mailing Address 22 Heathrow Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T

Occupation

Mortgage Loan Originator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11AI.5302

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Tim Sessoms

Mailing Address 6704 Fegan Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

ComputerNet Resource Group

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.5321

Amount of Each Receipt this Period

1000.00

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

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

1300.00

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

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

FOR LINE NUMBER:

PAGE 28 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Claude W Smith

Mailing Address 7107 Laurel Point Dr

City

Gibsonville

State

NC

Zip Code

27249

FEC ID number of contributing federal political committee.

C

Name of Employer

Triad Mechanical

Occupation

Co-owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Richard W Snow

Mailing Address PO Box 1046

City

Kernersville

State

NC

Zip Code

27285

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2013

Transaction ID : SA11AI.5198

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Donald Wendelken

Mailing Address 3406 Windswept Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SA11AI.5151

Amount of Each Receipt this Period

100.00

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

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

2150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Donald Wendelken

Mailing Address 3406 Windswept Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2013

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tamara G Wilson

Mailing Address 8201 Hunting Cog Rd

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Vacuum Center

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2013

Transaction ID : SA11AI.5297

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

200.00

31798.32

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

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant 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:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2013

Amount of Each Disbursement this Period

130.89

Transaction ID : SB17.5536

B. Aristotle, Inc

Mailing Address 205 Pennsylvania Ave, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
List Rental

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:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 11 / 2013

Amount of Each Disbursement this Period

1314.69

Transaction ID : SB17.5499

c. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

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:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5423

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

1945.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5431

B. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5458

C. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5476

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

1500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

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:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 12 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5503

B. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

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:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5523

C. Biz Boost Pros

Mailing Address 1852 Banking Street #9122

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Online 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:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2013

Amount of Each Disbursement this Period

1125.00

Transaction ID : SB17.5535

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

2125.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Double Tree

Mailing Address 300 Army Navy Dr

City	State	Zip Code
Arlington	VA	22202

Purpose of Disbursement
Lodging

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2013

Amount of Each Disbursement this Period

115.27

Transaction ID : SB17.5518

B. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2013

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5399

c. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5433

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

715.27

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5478

B. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5524

c. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5486

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

640.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5489

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5494

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5492

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

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

120.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5493

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5497

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5498

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

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

120.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5505

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Online Advertising

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.5508

c. G Graphics, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 811 Eula St, STE B

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Printing 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

789.59

Transaction ID : SB17.5434

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

869.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Hargett Supply Inc

Mailing Address 6845 Spencer Dixon Rd

City	State	Zip Code
Greensboro	NC	27438

Purpose of Disbursement
T-Shirts

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)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 13 / 2013

Amount of Each Disbursement this Period

222.15

Transaction ID : SB17.5461

B. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

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)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5422

c. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

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)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 29 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5430

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

1222.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5457

B. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2013

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5467

c. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.5474

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

1500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.5502

B. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.5522

c. Jeffrey D Plummer

Mailing Address 2259 Barrowcliffe Dr

City	State	Zip Code
Concord	NC	28027

Purpose of Disbursement
In-kind - Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2013

Amount of Each Disbursement this Period

1498.32

Transaction ID : SB17.5184

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

2998.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Powell Enterprises

Mailing Address 1635 Nova Ln

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.5435

B. Powell Enterprises

Mailing Address 1635 Nova Ln

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.5477

C. Powell Enterprises

Mailing Address 1635 Nova Ln

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.5528

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

525.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2013

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.5414

B. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2013

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.5426

c. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2013

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5438

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

5650.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		22		2013

Amount of Each Disbursement this Period

286.98

Transaction ID : SB17.5472

B. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2013

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5491

c. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online 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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2013

Amount of Each Disbursement this Period

224.90

Transaction ID : SB17.5531

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

761.88

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

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)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 03 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5400

B. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

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)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 29 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5432

c. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

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)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 25 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5479

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

3000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

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)

Date of Disbursement

M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5526

B. Time Warner Cable

Mailing Address 200 Centreport Dr

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Cable and Internet Service

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)

Date of Disbursement

M M / D D / Y Y Y Y
12 / 29 / 2013

Amount of Each Disbursement this Period

246.27

Transaction ID : SB17.5532

c. Verizon

Mailing Address 140 West Street

City	State	Zip Code
New York	NY	10007

Purpose of Disbursement
Telephone Service

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)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 10 / 2013

Amount of Each Disbursement this Period

93.68

Transaction ID : SB17.5413

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

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

1339.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 140 West Street

City	State	Zip Code
New York	NY	10007

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 22 / 2013

Amount of Each Disbursement this Period

370.18

Transaction ID : SB17.5473

B. VictoryStore.com

Mailing Address 5200 SW 30th St

City	State	Zip Code
Davenport	IA	52802

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2013

Amount of Each Disbursement this Period

2743.77

Transaction ID : SB17.5419

C. Katrina Whitt

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Bus Services

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 07 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5403

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

3613.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 49

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Katrina Whitt

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Bus Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5443

B. Katrina Whitt

Full Name (Last, First, Middle Initial)

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Bus Service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5480

C. Katrina Whitt

Full Name (Last, First, Middle Initial)

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Bus Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5527

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

1300.00

30699.69

