Image# 13941260379 PAGE 1 / 17

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only										
1. NAME OF T COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, tyover the lines.	ype 12FE4M5	12FE4M5									
North Carolina Medical	Society Federal F	Political Education and	d Action Commit	tee									
ADDRESS (number and street)	PO Box 25834												
Check if different	222 N. Person Street												
than previously reported. (ACC)	Raleigh		NC L	27611									
2. FEC IDENTIFICATION NUI	MBER ▼	CITY	STATE ▲	ZIP CODE ▲									
C C00003152	3	. IS THIS X NEW (N)	OR AM	ENDED									
4. TYPE OF REPORT (Choose One)	Report	Feb 20 (M2) May	20 (M5) Aug 2	20 (M8) Nov 20 (M11) (Non-Election Year Only)									
(a) Quarterly Reports:	Due On:	Mar 20 (M3) Jun 2	20 (M6) Sep 2	20 (M9) Dec 20 (M12) (Non-Election Year Only)									
April 15		Apr 20 (M4) Jul 20	0 (M7) Oct 2	0 (M10) Jan 31 (YE)									
Quarterly Report (Q1 July 15	(c) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)									
Quarterly Report (Q2 October 15	Report for the		Special (1	2S)									
Quarterly Report (Q3 January 31	;)	M M / D	D / Y = Y = Y = Y	in the									
Year-End Report (YE	-)	ection on		State of									
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Electio Report for the		Runoff (36	DR) Special (30S)									
Termination Report (TER)		ection on	D / Y = Y = Y	in the State of									
5. Covering Period 01	/ D D / Y Y O 20	13 through	M M / D D / 06 30	2013									
I certify that I have examined this	Report and to the bes	et of my knowledge and belie	f it is true, correct and	complete.									
Type or Print Name of Treasurer	Asst Treasurer Stepher	w. Keene											
Signature of Treasurer Asst Tr	reasurer Stephen W. Keene	[Electronically File	d) Date 07	22 2013									
NOTE: Submission of false, erronec	ous, or incomplete inform	nation may subject the person s	signing this Report to th	e penalties of 2 U.S.C. §437a.									
Office	, 1 1 1 1 1 1 1 1 1			FEC FORM 3X									
Use Only				Rev. 12/2004									

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

06 30 Report Covering the Period: 2013 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 8343.77 January 1, 2013 (b) Cash on Hand at 8343.77 Beginning of Reporting Period..... 19316.60 19316.60 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 27660.37 27660.37 6(a) and 6(c) for Column B)..... 5500.00 5500.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 22160.37 22160.37 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

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

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

I. Receipts	ots COLUMN A COLUMN B Total This Period Calendar Year-to-Dat						
Contributions (other than loans) From:	Total This Period	Calendar Year-to-Date					
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	8935.00	8935.00					
(ii) Unitemized	10380.00	10380.00					
(iii) TOTAL (add							
Lines 11(a)(i) and (ii)▶	19315.00	19315.00					
(b) Political Party Committees	0.00	0.00					
(b) Political Party Committees(c) Other Political Committees							
(such as PACs)	0.00	0.00					
(d) Total Contributions (add Lines	7						
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	19315.00	19315.00					
Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
F	0.00						
All Loans Received	0.00	0.00					
Loan Repayments Received	0.00	0.00					
Offsets To Operating Expenditures		, , , , , , , , , , , , , , , , , , , ,					
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
Refunds of Contributions Made							
to Federal Candidates and Other		0.00					
Political Committees	0.00	0.00					
Other Federal Receipts	1.00	4.00					
(Dividends, Interest, etc.)	1.60	1.60					
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
(IIOIII COIIOGGIO FIO)	3.00	0.00					
(b) Louis Funda (frans Cabadula IIF)	0.00	0.00					
(b) Levin Funds (from Schedule H5)	9 9	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
(6) 1044 114101010 (4444 10(4) 4114 10(6))		0.00					
Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	19316.60	19316.60					
Total Federal Receipts							
iotai i odorai riodolpio							

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Cilou	Calelidal Teat-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(") No Follow Observe	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00
Transfers to Affiliated/Other Party	2.22	0.00
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	7	
(use Schedule E)	0.00	0.00
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan Repayments Made	3.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(h) Palitical Parts Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
_	, , , , , , , , , , , , , , , , , , , ,	
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	5500.00	5500.00
Circi Dioduscinicino	3	
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	
(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	0.00	2.22
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5500.00	5500.00
, , , , , , , , , , , , , , , , , , , ,	7 7	3300.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	5500.00	5500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	19315.00	19315.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19315.00	19315.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE	-	: PAGE	6 OF	17
(check only	one)			
X 11a	11b	11c	12	
13	14	15	16	17

	statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)	/ Foderal Political Education and A	ction Committee
<u>'</u>	y Federal Political Education and A	
Full Name (Last, First, Middle Initial) Dr. Todd Michael Beste		Date of Receipt
Mailing Address Department of Obstetrics &	•	04 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.15053
Greenville	NC 27858-4354	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Brody School of Medicine	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Anthony Caprio		Date of Receipt
Mailing Address 5112 Strawberry Hill Drive		M = M / D = D / Y = Y = Y
Apt A		02 06 2013
Charlette	State Zip Code	Transaction ID : SA11AI.14996
Charlotte	NC 28211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Elizabeth Family Medicine	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Dr. Christoph Robert Diasio		Date of Receipt
Mailing Address 195 West Illinois Avenue	Choto 7:- 01	04 01 2013
City Southern Pines	State Zip Code NC 28387-5808	Transaction ID : SA11AI.15057 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Sandhills Pediatrics, Inc.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number	r only)	

FOF	LINE	NU	MBER	:	PAGE	7	OF	17
(che	ck only	or	ne)					
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	statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)	/ Fodoral Political Education and A	ation Committee
/ Norun Carolina Medical Societ	y Federal Political Education and A	
Full Name (Last, First, Middle Initial) Dr. Michael T. Draelos		Date of Receipt
Mailing Address 624 Quaker Lane Ste 105C		02 01 2013
City	State Zip Code	Transaction ID : SA11AI.15001
High Point	NC 27262-3832	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
High Point GI & Pulmonary Associates	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Matthew Kent Flynn		Date of Receipt
Mailing Address 5603 Duraleigh Road		M = M / D = D / Y = Y = Y
Ste 111	State Zip Code	04 01 2013
City Raleigh	State Zip Code NC 27612-2688	Transaction ID : SA11AI.15058
	21012-2000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Voluntary member contribution
Flynn Dermatology	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Solomon Gordon		Date of Receipt
Mailing Address 4609 Weaverhall Drive		01 08 2013
City	State Zip Code	Transaction ID : SA11AI.14956
Fayetteville	NC 28314-2578	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Carolina Imaging Centre, Inc.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
,		
TOTAL This Period (last page this line number	r only)	

FOF	LINE	NU	MBER	:	PAGE	8	OF	17
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NAME OF COMMITTEE (In Full)	ety Federal Political Education and	
Full Name (Last, First, Middle Initial) Paul R Greenlaw Mailing Address 1803 Forest Hills Road		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.15137
Wilson	NC 27893	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Wilson Orthopaedic Surgery	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Gordon Groh		Date of Receipt
Mailing Address 129 McDowell Street		M = M / D = D / Y = Y = Y
City	State Zip Code	02 22 2013
Asheville	NC 28801	Transaction ID : SA11AI.15015
_	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Blue Ridge Bone & Joint Clinic	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. James Bryan Hall		Date of Receipt
Mailing Address 1025 Morehead Medical I	Drive, 6th F	01 22 2013
City	State Zip Code	Transaction ID : SA11AI.14992
Charlotte	NC 28204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Voluntary member contribution
Blumental Cancer Center-GYN On	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optiona	1)	750.00
TOTAL This Period (last page this line num	pher only)	

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

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Detailed Summary Page 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) North Carolina Medical Society Federal Political Education and Action Committee Full Name (Last, First, Middle Initial) Rebecca Hayes Date of Receipt Mailing Address 36 Yorktown Street, NW 2013 City State Zip Code Transaction ID: SA11AI.15074 NC Concord 28025 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Cabarrus Family Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Rebecca Hayes Date of Receipt Mailing Address 36 Yorktown Street, NW 05 06 2013 City State Zip Code Transaction ID: SA11AI.15102 NC Concord 28025 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Voluntary member contribution Name of Employer Occupation Cabarrus Family Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) c. Shepard Hurwitz Date of Receipt Mailing Address 400 Silver Cedar Court 01 17 2013 City State Zip Code Transaction ID: SA11AI.14991 NC Chapel Hill 27514 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Voluntary member contribution Name of Employer Occupation Physician **UNC Hospitals**

SUBTOTAL of Receipts This Page (optional)		•		7		7	59	0.00	
TOTAL This Period (last page this line number	only)	•	Ξ	7	_	7		_	

250.00

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

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

FOR LINE NUMBER: (check only one)						PAGE		10	OF		17
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		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) North Carolina Medical Society Federal Political Education and Action Committee Full Name (Last, First, Middle Initial) Dr. Allison Lewis Jacokes Date of Receipt Mailing Address 901 Ridgefield Drive 01 2013 City State Zip Code Transaction ID: SA11AI.15059 NC Raleigh 27609 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Physician Associates in Women's Health Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Philene Krogel Date of Receipt Mailing Address 2322 Shady Forks Road 05 13 2013 City State Zip Code Transaction ID: SA11AI.15106 NC Morganton 28655 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Women's Health Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Robert Lacin Date of Receipt Mailing Address 4207 Lake Boone Trail 03 06 2013 Suite 220 City State Zip Code Transaction ID: SA11AI.15144 NC Raleigh 27607 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Voluntary member contribution Name of Employer Occupation Physician Rex Neurosurgery Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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	nd Statements may not be sold or used by any per the name and address of any political committee				
NAME OF COMMITTEE (In Full) North Carolina Medical Socie	ety Federal Political Education and	Action Committee			
Full Name (Last, First, Middle Initial) Dr. Jonathan Cardeen Lowry Mailing Address 335 E Parker Road		Date of Receipt			
		06 26 2013			
City	State Zip Code	Transaction ID : SA11AI.15160			
Morganton	NC 28655-5112	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer	Occupation	Voluntary member contribution			
Morganton Eye Physicians, PA	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	500.00				
Full Name (Last, First, Middle Initial) 3. Lewis Martin		Date of Receipt			
Mailing Address 1407 Kenan Street, NW		04 05 2013 _			
City	State Zip Code	Transaction ID : SA11AI.15064			
Wilson	NC 27893	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	y .				
Name of Employer	Occupation	Voluntary member contribution			
Wilson Orthopaedic Surgery & N	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	345.00				
Full Name (Last, First, Middle Initial) David K. Mertz	I	Date of Receipt			
Mailing Address 530 West Webb Avenue		04 11 2013			
City	State Zip Code	Transaction ID : SA11AI.15065			
Burlington	NC 27217	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	Voluntary member contribution			
Burlington Pediatrics	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional) >	1095.00			
, , ,	,				
TOTAL This Period (last page this line num	ber only)				

Use separate schedule(s) for each category of the

		NUMBER	PAGE	 12 OF	=	17	
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Detailed Summary Page 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) North Carolina Medical Society Federal Political Education and Action Committee Full Name (Last, First, Middle Initial) Edith Miller Date of Receipt Mailing Address 1114 Belgrave Place 08 2013 City State Zip Code Transaction ID: SA11AI.15007 NC Charlotte 28203 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Physician Carolinas HealthCare System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. John Gardiner Richard Roddey Date of Receipt Mailing Address 2015 Randolph Road Suite 208 05 28 2013 City State Zip Code Transaction ID: SA11AI.15120 Charlotte NC 28207-1200 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Voluntary member contribution Name of Employer Occupation Charlotte Gastro & Hep Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Patricia Koury Roddey Date of Receipt Mailing Address 3535 Randolph Road 28 05 2013 Ste 300 Zip Code City State Transaction ID: SA11AI.15121 NC Charlotte 28211-1082 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Voluntary member contribution Name of Employer Occupation Physician Mecklenburg Medical Group, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

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or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee						
NAME OF COMMITTEE (In Full) North Carolina Medical Society	ty Federal Political Education and A	Action Committee					
Full Name (Last, First, Middle Initial) James Santangelo		Date of Receipt					
Mailing Address 355 Edinburg Drive		05 31 2013					
City	State Zip Code	Transaction ID : SA11AI.15127					
Fayetteville	NC 28313	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	Voluntary member contribution					
Womack Army Hospital							
Receipt For: Primary General	Physician Aggregate Year-to-Date ▼	_					
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) Dr. Judith Dirocco Sears	Date of Receipt						
Mailing Address PO Box 30337	Mailing Address PO Box 30337						
0"	7.0.1	04 15 2013					
City	State Zip Code	Transaction ID : SA11AI.15066					
Winston Salem	NC 27130-0337	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	federal political committee.						
Name of Employer Piedmont Radiation Oncology- Winston-S	Occupation Physician	Voluntary member contribution					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	500.00						
Full Name (Last, First, Middle Initial) Dr. Victor W. Sears Jr.		Date of Receipt					
Mailing Address 2025 Frontis Plaza Bouleva Suite 200		04 15 / Y = Y = Y = Y					
City Winston Salem	State Zip Code NC 27103-5663	Transaction ID : SA11AI.15067 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	500.00					
Name of Employer	Occupation	Voluntary member contribution					
Digestive Health Specialists	Physician						
Receipt For:	Aggregate Year-to-Date ▼	7					
Primary General Other (specify) ▼	500.00						
	er only)	1250.00					

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	13	14	1	5	16			17	

NAME OF COMMITTEE (In Full) North Carolina Medical Society	y Federal Political Education and	Action Committee					
Full Name (Last, First, Middle Initial) Lisa Shock	Lisa Shock						
Mailing Address 1609 Foreman Street		01 02 2013					
City	State Zip Code	Transaction ID : SA11AI.14951					
Hillsborough	NC 27278	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	Voluntary member contribution					
Cornerstone Internal Medicine	Physician Assistant						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General	1.99.094.0 104.10 24.0 7						
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) Dr. Brian Edward Smith		Date of Receipt					
Mailing Address 8 Medical Park Drive	01 08 2013						
City	State Zip Code	Transaction ID : SA11AI.14961					
Asheville	NC 28803-2493	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	Voluntary member contribution					
Asheville Eye Associates, PLLC	Physician						
Receipt For:	Aggregate Year-to-Date ▼	\dashv					
Primary General Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial)	1	Date of Receipt					
Mailing Address 322 Main Street		04 22 2013					
City	State Zip Code	Transaction ID : SA11AI.15091					
Prospect Hill	NC 27314	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	Voluntary member contribution					
Prospect Hill Community Health	Physician						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	250.00						
SUBTOTAL of Receipts This Page (optional)		750.00					

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

FOR	PAGE	. ′	15	OF		17				
(check only one)										
×	11a		11b		11c		12			
	13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ty Federal Political Education and A	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) William L Stewart Mailing Address 195 West Illinois Avenue City Southern Pines FEC ID number of contributing federal political committee. Name of Employer Sandhills Pediatrics Receipt For: Primary General Other (specify)	State Zip Code NC 28387 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 05 02 2013 Transaction ID : SA11AI.15111 Amount of Each Receipt this Period 250.00 Voluntary member contribution
Full Name (Last, First, Middle Initial) Dr. William Alfred Walker Mailing Address 2015 Randolph Road Suite 201 City Charlotte FEC ID number of contributing federal political committee. Name of Employer Charlotte Colon & Rectal Surgery Assoc Receipt For: Primary General Other (specify)	State Zip Code NC 28207-1200 C Occupation Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numb	er only)	8935.00

SCHEDULE B (FEC Form 3X)		EOD LINE	INE NUMBER: PAGE 16 OF 17					
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only	E NOMBEN.					
	for each category of the Detailed Summary Page	1 \ \ \ \ 21h	22 23 24 25 26					
	Dotailed Guillinary Fage	27	28a 28b 28c X 29 30b					
Any information copied from such Reports and Sta								
or for commercial purposes, other than using the r	ame and address of any poli	tical committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
$ \; angle$ North Carolina Medical Society F	ederal Political Educ	ation and A	ction Committee					
Full Name (Last, First, Middle Initial)								
A. Tom Apodaca			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address 1504 Fifth Avenue, West			01 24 2013					
City	State Zip Code							
Hendersonville	NC 28739		Transaction ID : SB29.14980					
Purpose of Disbursement								
2014 NC Senate Primary Election contribution		<u> </u>	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Office Sought: House Disburs	sement For:	Туре						
Senate Disburs	Primary General							
President	Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial)								
B. Committee to Elect Republican V	Vomen		Date of Disbursement					
Mailian Adduses DOD cook			M M / D D / Y Y Y Y Y					
Mailing Address PO Box 26201			01 24 2013					
City	State Zip Code		Transaction ID - SP20 44095					
Raleigh	NC 26201		Transaction ID : SB29.14986					
Purpose of Disbursement Legislative Opening breakfast-1/30/13			Amount of East District and this David					
Candidate Name		البسيا	Amount of Each Disbursement this Period					
Canadate Name		Category/ Type	500.00					
Office Sought: House Disburs	sement For:	.,,,,						
Senate	Primary General							
President	Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial)			Date of Disbursement					
C. Martin Nesbitt								
Mailing Address 180 Robinhood Road, Apt. 3			01 24 2013					
City	State Zip Code		Transaction ID : SB29.14974					
Asheville Purpose of Disbursement	NC 28804							
2014 NC Senate Primary Election contribution			Amount of Each Disbursement this Period					
Candidate Name		Category/						
		Type	1000.00					
	sement For:							
Senate President	Primary General							
State: District:	Other (specify) ▼							
Side Side Side Side Side Side Side Side								
SUBTOTAL of Disbursements This Page (optiona)		2500.00					
	,							
TOTAL This Period (last page this line number or	ıly)							

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SC	CHEDULE B (FEC Form 3X)	505				NUMBER: PAGE 17 OF 17				
	EMIZED DISBURSEMENTS		ate schedule(s)	FOR LIN	NE NUMBI only one)	=H:		LP	AGE 17	Oi. 11
111	EINIIZED DISDURSEINIEN IS		ategory of the	21		2 [23	24	25	26
		Detailed S	ummary Page	27	7 28	3a	28b	280	c 🗙 29	30b
An	y information copied from such Reports and Staten	nents may no	ot be sold or us	sed by any ne	erson for t	he pur	rpose (of solicit		butions
	for commercial purposes, other than using the name									
\setminus	NAME OF COMMITTEE (In Full)									
angle	North Carolina Medical Society Fed	deral Poli	tical Educa	ation and	Action	Con	nmitt	tee		
\angle										
٨	Full Name (Last, First, Middle Initial)				Dot	o of D	isburse	mont		
Α.	Buck Newton				Dale	; OI DI				
	Mailing Address 415 Sunset Road, NW				- M)1		24	2013	/ " Y
	3									
	City		Zip Code		Tr	aneac	tion ID	: SB29.	1/070	
	Wilson	NC	' '''	3115aCI	טו ווטוו	. 3029.	,143/3			
	Purpose of Disbursement 2014 NC Senate Primary Election contribution				1		: Fach	Dishura	sement this	o Doriod
	Candidate Name				Amo	Julii Oi	Eacii	DISDUIS	ement this	5 Fellou
	Candidate Name			Category/ Type					10	00.00
	Office Sought: House Disbursen	nent For:		Турс			,			
	Senate	Primary	General							
	President	Other (specif	fy) 🔻							
	State: District:									
_	Full Name (Last, First, Middle Initial)									
В.	Louis Pate				Date	e of Di	isburse	ment		
	Mading Address BOD 045				M	M /		D /	2042	
	Mailing Address PO Box 945					01		24	2013	
	City	State	Zip Code		T.,				44070	
	Mt. Olive	NC	28365		ır ır	ansacı	tion ID) : SB29.	.14976	
	Purpose of Disbursement 2014 NC Senate Primary Election contribution				1 .			5		
	Candidate Name			Amount of Each Disbursement this Period						
	Candidate Name			Category/ Type					10	00.00
	Office Sought: House Disbursen	nent For:		Туре			,			
		Primary	General							
	President	Other (specif	fy) ▼							
	State: District:									
	Full Name (Last, First, Middle Initial)									
C.	Norman Sanderson				Date	e of Di	isburse	ment		
	Mailing Address, 260 Pennett Bood, #4					м /)1		D /	2013	Y
	Mailing Address 269 Bennett Road, #4							י ע	2013	
	City	State	Zip Code		т.	0000	tion ID	: SB29.	14002	
		NC	28510			ansacı	טו ווסוו	: SD29.	.14903	
	Purpose of Disbursement 2014 NC Senate Primary Election contribution				1					
	Candidate Name				Amo	ount of	Each	Disburs	ement this	s Period
	Candidate Name	Category/ Type					10	00.00		
	Office Sought: House Disbursen									
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S	UBTOTAL of Disbursements This Page (optional)			·····			7		30	00.00
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	OTAL This Period (last page this line number only)						-00 -			as 1