



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Meadows for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	63625.00	807438.98
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	25.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	63625.00	807413.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	153083.44	1040536.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	153083.44	1040536.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	17244.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	249000.00	

**For further information contact:**

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

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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

**Meadows for Congress**

Report Covering the Period: From:  /  /  To:  /  /

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="17425.00"/>	<input type="text" value="490284.50"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="3250.00"/>	<input type="text" value="52156.22"/>	<input type="text" value="25.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="20675.00"/>	<input type="text" value="542440.72"/>	<input type="text" value="25.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="42550.00"/>	<input type="text" value="253600.00"/>	<input type="text" value="2500.00"/>

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
400.00	11398.26	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
63625.00	807438.98	2525.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	17369.53	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	255000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	255000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
63625.00	1079808.51	2525.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Meadows for Congress

Report Covering the Period: From:  /  /  To:  /  /

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
153083.44	1040536.73	18526.87
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
6000.00	6000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
6000.00	6000.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	25.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 68

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
0.00	25.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
159083.44	1046561.73	18526.87

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

63625.00	807413.98	2525.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

153083.44	1040536.73	18526.87
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	112703.35
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	63625.00
25. SUBTOTAL (add Line 23 and Line 24).....	176328.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	159083.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	17244.91

**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 7 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susanne P. Alford**

Mailing Address 467 Royal Tern Road S

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012

**Transaction ID : SA11AI.8249**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harriet L. Bauknight**

Mailing Address 111 Rockingham Road

City State Zip Code  
Greenville SC 29607

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : SA11AI.8523**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**William H. Booth**

Mailing Address 5909 Beacon Shores Street

City State Zip Code  
Tampa FL 33616

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

Name of Employer Occupation  
Abi Companies, Inc. Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012

**Transaction ID : SA11AI.8271**

Amount of Each Receipt this Period  
250.00

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

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

2750.00

**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 8 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donna A. Broadwell**

Mailing Address 392 Vanderbilt Road

City Asheville State NC Zip Code 28803

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.8425**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Barbara Carlton**

Mailing Address P.O. Box 1088

City Wauchula State FL Zip Code 33873

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.8334**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John F.A.V. Cecil**

Mailing Address 68 Beadle Lane

City Asheville State NC Zip Code 28803

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

Name of Employer Biltmore Farms, LLC Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : SA11AI.8551**

Amount of Each Receipt this Period  
 250.00

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

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

1750.00



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

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

FOR LINE NUMBER: PAGE 9 OF 68  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia Guy Chambers**

Mailing Address 64 St. Andrews Drive, #40

City State Zip Code  
Sapphire NC 28774

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : SA11AI.8256**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Chappell**

Mailing Address P.O. Box 521

City State Zip Code  
Rosman NC 28772

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

Name of Employer Occupation  
Transylvania County Board County Commissioner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : SA11AI.8253**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Orville Coward Jr.**

Mailing Address P.O. Box 270

City State Zip Code  
Webster NC 28788

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

Name of Employer Occupation  
Coward, Hicks & Siler Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : SA11AI.8248**

Amount of Each Receipt this Period  
100.00

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

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

450.00

**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 10 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia H. Danz**

Mailing Address 102 Moss Ridge Court

City State Zip Code  
Flat Rock NC 28731

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11AI.8548**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alex Debogory Jr.**

Mailing Address 3200 W. 84th Street

City State Zip Code  
Hialeah FL 33018

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

Name of Employer Occupation  
US Foundry & Manufacturing President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11AI.8336**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Dekker**

Mailing Address 24 Iroquois Drive

City State Zip Code  
Hendersonville NC 28791

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11AI.8465**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

**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 11 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dan C. Duckham**

Mailing Address 1007 Laurel Knob Road

City Cashiers State NC Zip Code 23717

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

Name of Employer Self-Employed Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8275**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Diane A. Ginn**

Mailing Address 436 Wildcat lane

City Cashiers State NC Zip Code 28717

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8242**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kimberly E. Gold**

Mailing Address 67 Oak Gate Drive

City Hendersonville State NC Zip Code 28739

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

Name of Employer N/A Occupation Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.8546**

Amount of Each Receipt this Period  
**300.00**  
 Reattribute: from spouse, William

**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 12 OF 68  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William F. Gold Jr.**  
 Mailing Address 67 Oak Gate Drive  
 City Hendersonville State NC Zip Code 28739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UBS Financial Services Occupation Vice President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012  
**Transaction ID : SA11AI.8454**  
 Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**William F. Gold Jr.**  
 Mailing Address 67 Oak Gate Drive  
 City Hendersonville State NC Zip Code 28739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UBS Financial Services Occupation Vice President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012  
**Transaction ID : SA11AI.8545**  
 Amount of Each Receipt this Period  
 -300.00  
 Reattribute: to spouse, Kimberly

**C.** Full Name (Last, First, Middle Initial)  
**Katharine Henry**  
 Mailing Address 8150 La Jolla Shores Drive  
 City La Jolla State CA Zip Code 92037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012  
**Transaction ID : SA11AI.8269**  
 Amount of Each Receipt this Period  
 100.00

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

100.00

**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 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David P. Huskins**

Mailing Address P.O. Box 182

City State Zip Code  
Linville Falls NC 28647

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

Name of Employer Occupation  
Self-Employed Public Affairs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8263**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**G. Truett Jarrard Jr.**

Mailing Address P.O. Box 1321

City State Zip Code  
Cashiers NC 28717

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

Name of Employer Occupation  
Weathington Firm Physican

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
875.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11AI.8379**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dana H. Jones**

Mailing Address 1755 Healey Fields Road

City State Zip Code  
Andrews NC 28901

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

Name of Employer Occupation  
Appraisal Services Company Appraiser

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.8427**

Amount of Each Receipt this Period  
300.00

**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: PAGE 14 OF 68  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel D. Lupas**

Mailing Address P.O. Box 1424

City State Zip Code  
Cashiers NC 28717

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

Name of Employer Occupation  
Landmark Realty Group Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8278**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Perry W. Mace**

Mailing Address 93 Towne Place

City State Zip Code  
Hendersonville NC 28792

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

Name of Employer Occupation  
Pw Mace & Associates Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11AI.8397**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward C. Mann**

Mailing Address 1845 St. Julian Place

City State Zip Code  
Columbia SC 29204

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

Name of Employer Occupation  
Columbia Development President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8279**

Amount of Each Receipt this Period  
500.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 15 OF 68  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan McKenzie**

Mailing Address 31 Glen Cove Drive

City Arden State NC Zip Code 28704

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

Name of Employer Asheville Anesthesia Associate Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1452.29**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11AI.8318**

Amount of Each Receipt this Period  
**75.00**

**B.** Full Name (Last, First, Middle Initial)  
**Diana L. Meinecke**

Mailing Address 75 Sterling Drive

City Canton State NC Zip Code 28716

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11AI.8403**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Miles**

Mailing Address P.O. Box 1485

City Cashiers State NC Zip Code 28717

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 18 / 2012**

**Transaction ID : SA11AI.8251**

Amount of Each Receipt this Period  
**250.00**

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

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

**425.00**

**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 16 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Grace Mueller**

Mailing Address P.O. Box 509

City State Zip Code  
Glennville NC 28736

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2012

**Transaction ID : SA11AI.8270**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Nash**

Mailing Address 201 Pine Avenue

City State Zip Code  
Spruce Pine NC 28777

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

Name of Employer Occupation  
Owner Akabis, Inc.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		25		2012

**Transaction ID : SA11AI.8390**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1437 Shortoff Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3350.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		23		2012

**Transaction ID : SA11AI.8348**

Amount of Each Receipt this Period  
**1350.00**

Redesignate \$850 to primary

**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: (check only one)	PAGE 17 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Smith**

Mailing Address 1437 Shortoff Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 24 2012

**Transaction ID : SA11AI.8350**

Amount of Each Receipt this Period  
 -850.00

Redesignate: to primary

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Smith**

Mailing Address 1437 Shortoff Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 24 2012

**Transaction ID : SA11AI.8351**

Amount of Each Receipt this Period  
 850.00

Redesignate: from General

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Stelpton**

Mailing Address 5110 N. Federal Highway

City State Zip Code  
Fort Lauderdale FL 33308

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : SA11AI.8244**

Amount of Each Receipt this Period  
 1000.00

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

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

1000.00

**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 18 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dana Stonestreet**

Mailing Address P.O. Box 10

City Asheville State NC Zip Code 28802

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

Name of Employer Home Trust Bank Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11AI.8388**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ben Sutton**

Mailing Address 540 N. Trade Street

City Winston-Salem State NC Zip Code 27101

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

Name of Employer IMG College Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.8461**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**The Chickasaw Nation**

Mailing Address 2020 Lonnie Abbott Blvd

City Ada State OK Zip Code 74820

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11AI.8408**

Amount of Each Receipt this Period  
2500.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 68  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Van Hoogen**

Mailing Address P.O. Box 2681

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
Van Hoogen Homes, LLC Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 24 2012

**Transaction ID : SA11AI.8340**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charlotte Walsh**

Mailing Address 225 Amblewood Trail

City State Zip Code  
Hendersonville NC 28739

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 26 2012

**Transaction ID : SA11AI.8380**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Woodroffe III**

Mailing Address 2805 Samara Drive

City State Zip Code  
Tampa FL 33618

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2012

**Transaction ID : SA11AI.8180**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

**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 20 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean L. Workman**

Mailing Address 1598 E. Normandy Blvd

City Deltona State FL Zip Code 32725

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11Al.8261**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

17425.00

**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 21 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : SA11C.8549**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11C.8333**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11C.8424**

Amount of Each Receipt this Period  
-1000.00  
2nd contribution sent in error

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CAMPAIGN FOR WORKING FAMILIES**

Mailing Address 2800 SHIRLINGTON ROAD, SUITE 930

City ARLINGTON State VA Zip Code 22206

FEC ID number of contributing federal political committee. **C** C00325076

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11C.8467**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND**

Mailing Address 1680 CAPITAL ONE DRIVE  
ATTN: 19050-1204

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11C.8328**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC**

Mailing Address ATTENTION: MARY ANN ROUSE  
1000 BLYTHE BOULEVARD

City CHARLOTTE State NC Zip Code 28203

FEC ID number of contributing federal political committee. **C** C00423871

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2012

**Transaction ID : SA11C.8616**

Amount of Each Receipt this Period  
 2500.00

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

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

8500.00

**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 23 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHESAPEAKE ENERGY CORPORATION FED-PAC**

Mailing Address PO BOX 18496

City State Zip Code  
OKLAHOMA CITY OK 73154

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : SA11C.8448**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CITIZENS UNITED POLITICAL VICTORY FUND**

Mailing Address 1006 PENNSYLVANIA AVE SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11C.8321**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Bill Porter**

Mailing Address 97 S. Bear Creek Road

City State Zip Code  
Asheville NC 28806

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : SA11C.8458**

Amount of Each Receipt this Period  
50.00

Non-Federal Campaign Committee - Federally Permissible Funds

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

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

6050.00

**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 24 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial)  
**COMMUNITY BANCSHARES OF MISSISSIPPI INC. POLITICAL ACTION COMMITTEE**

Mailing Address **1255 W GOVERNMENT ST**

City	State	Zip Code
BRANDON	MS	39043

FEC ID number of contributing federal political committee. **C C00228924**

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>
---	--

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11C.8525**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address **601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600**

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>
---	--

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11C.8532**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address **550 SOUTH TRYON STREET**

City	State	Zip Code
CHARLOTTE	NC	28202

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>
---	--

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11C.8358**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> 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 25 OF 68  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDISON INTERNATIONAL PAC**

Mailing Address 3699 WILSHIRE BLVD., #1290

City State Zip Code  
LOS ANGELES CA 90010

FEC ID number of contributing federal political committee. **C C00019653**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : SA11C.8189**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FOREST LANDOWNERS ASSOCIATION, INC., POLITICAL ACTION COMMITTEE**

Mailing Address 900 CIRCLE 75 PARKWAY SUITE 205

City State Zip Code  
ATLANTA GA 30339

FEC ID number of contributing federal political committee. **C C00242040**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 23 2012

**Transaction ID : SA11C.8312**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**FREEDOM ADVANCEMENT FUND**

Mailing Address 2470 DANIELL'S BRIDGE RD STE 121

City State Zip Code  
ATHENS GA 30606

FEC ID number of contributing federal political committee. **C C00490235**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 23 2012

**Transaction ID : SA11C.8314**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

**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 26 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOM ADVANCEMENT FUND**

Mailing Address 2470 DANIELL'S BRIDGE RD STE 121

City	State	Zip Code
ATHENS	GA	30606

FEC ID number of contributing federal political committee. **C** C00490235

Name of Employer	Occupation

Receipt For: 2012  
 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  
 10 / 25 / 2012

**Transaction ID : SA11C.8361**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Haywood County Republican Party**

Mailing Address 75 Sterling Drive

City	State	Zip Code
Canton	NC	28716

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

Name of Employer	Occupation

Receipt For: 2012  
 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  
 11 / 06 / 2012

**Transaction ID : SA11C.8590**

Amount of Each Receipt this Period  
500.00

From Federally Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

Mailing Address 412 FIRST STREET, SE, SUITE 300

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer	Occupation

Receipt For: 2012  
 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  
 11 / 05 / 2012

**Transaction ID : SA11C.8530**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**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 27 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**IPAA WILDCATTERS FUND**

Mailing Address 1201 15TH STREET, NW  
SUITE 300

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00246306**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11C.8345**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**KBR, INC. PAC**

Mailing Address 601 JEFFERSON  
SUITE 3455B

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C C00431114**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11C.8409**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MCCAUL FOR CONGRESS, INC**

Mailing Address 815-A BRAZOS STREET  
PMB 230

City AUSTIN State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C C00392688**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11C.8326**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

**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 28 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11C.8414**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL PRO-LIFE ALLIANCE PAC**

Mailing Address 4521 WINDSOR ARMS CT

City ANNANDALE State VA Zip Code 22003

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11C.8411**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION**

Mailing Address 1200 17TH STREET NW #800

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70004700

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : SA11C.8385**

Amount of Each Receipt this Period  
 2500.00

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

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

5500.00

**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 29 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00486043

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

**Transaction ID : SA11C.8182**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**SUE MYRICK FOR CONGRESS**

Mailing Address P.O. BOX 37091

City State Zip Code  
CHARLOTTE NC 28237

FEC ID number of contributing federal political committee. **C** C00304667

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012

**Transaction ID : SA11C.8186**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**TOM RICE FOR CONGRESS**

Mailing Address 1107 48TH AVE. N.  
SUITE 210

City State Zip Code  
MYRTLE BEACH SC 29577

FEC ID number of contributing federal political committee. **C** C00506048

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : SA11C.8381**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

**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 30 OF 68
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNIGROUP INC POLITICAL ACTION COMMITTEE**

Mailing Address **ONE PREMIER DRIVE**

City **FENTON** State **MO** Zip Code **63026**

FEC ID number of contributing federal political committee. **C C00435909**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11C.8398**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Western Radiologists and Surgeons PAC**

Mailing Address **84 Coxe Ave, Ste 2A**

City **Asheville** State **NC** Zip Code **28801**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11C.8521**

Amount of Each Receipt this Period  
**2000.00**

From Federally Permissible Funds

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**4000.00**

**42550.00**



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 134.99 <b>Transaction ID : SB17.8537</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Fee	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. ANDERSON FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 160 LOUISVILLE ROAD		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8511</b>
City GROVETOWN	State GA	
Zip Code 30813	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name <b>LEE I ANDERSON</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

Full Name (Last, First, Middle Initial) <b>c. Thomas M. Apodaca</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 214 N. King Street		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.8440</b>
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1934.99
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Thomas M. Apodaca</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 214 N. King Street		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.8552</b>
City Hendersonville State NC Zip Code 28792	Purpose of Disbursement Compensation - Campaign work 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Blue Ridge Christian News</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 29 Crystal Street Suite 101		Amount of Each Disbursement this Period 560.00 <b>Transaction ID : SB17.8553</b>
City Spruce Pine State NC Zip Code 28777	Purpose of Disbursement Newspaper Ad 004 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. BOBBY SCHILLING FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 367 AVENUE OF THE CITIES SUITE D		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8512</b>
City EAST MOLINE State IL Zip Code 61244	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>ROBERT T. SCHILLING</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: IL District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2360.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. CANSECO FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 10004 WURZBACH ROAD #366		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8517</b>
City SAN ANTONIO State TX Zip Code 78230	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>FRANCISCO RAUL QUICO CANSECO</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 23	

Full Name (Last, First, Middle Initial) <b>B. Capital One Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 10698.97 <b>Transaction ID : SB17.8364</b>
City Charlotte State NC Zip Code 28272-1083	Purpose of Disbursement Credit Card Transactions - See itemization 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Vision Screenprinting and Graphics, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address P.O. Box 16253		Amount of Each Disbursement this Period 4065.00 <b>Transaction ID : SB17.8364.0</b> <b>[MEMO ITEM]</b>
City Greenville State SC Zip Code 29606	Purpose of Disbursement Marketing - Signs 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11198.97
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Expedia</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 333 108th Avenue, NE		Amount of Each Disbursement this Period 451.82
City Bellevue State WA Zip Code 98004	Purpose of Disbursement Hotel	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8364.1 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. Expedia</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 333 108th Avenue, NE		Amount of Each Disbursement this Period 717.80
City Bellevue State WA Zip Code 98004	Purpose of Disbursement Airfare (2) - AVL to DCA	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8364.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>c. Vision Screenprinting and Graphics, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address P.O. Box 16253		Amount of Each Disbursement this Period 1942.50
City Greenville State SC Zip Code 29606	Purpose of Disbursement Marketing - Signs	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8364.3 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2012
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 53.38
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : SB17.8364.4
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. The Waynesville Inn</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2012
Mailing Address 176 Country Club Drive		Amount of Each Disbursement this Period 738.30
City Waynesville	State NC	
Zip Code 28786	Purpose of Disbursement Meeting Room; Breakfast	Transaction ID : SB17.8364.5
Candidate Name <b>Meadows for Congress</b>	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Hilton Asheville Biltmore Park</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2012
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 2014.17
City Asheville	State NC	
Zip Code 28803	Purpose of Disbursement Meeting Room; Breakfast	Transaction ID : SB17.8364.6
Candidate Name <b>Meadows for Congress</b>	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 450.00
City Highlands	State NC Zip Code 28741	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : SB17.8364.7 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. NC Dept of Revenue</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2012
Mailing Address P.O. Box 25000		Amount of Each Disbursement this Period 266.00
City Raleigh	State NC Zip Code 27640	
Purpose of Disbursement Tax - Robert Doug Crosby	Category/Type 001	Transaction ID : SB17.8364.8 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Capital One Bank</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2012
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 6734.71
City Charlotte	State NC Zip Code 28272-1083	
Purpose of Disbursement Credit Card Transactions - See below	Category/Type 001	Transaction ID : SB17.8595
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6734.71
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 59.00
City Cashiers	State NC	
Zip Code 28717	Purpose of Disbursement Business Cards	Transaction ID : SB17.8595.0 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Cherokee Scout</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P.O. Box 190		Amount of Each Disbursement this Period 1473.20
City Murphy	State NC	
Zip Code 28906	Purpose of Disbursement Newspaper Ad	Transaction ID : SB17.8595.1 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Graham Star</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address P.O. Box 69		Amount of Each Disbursement this Period 693.00
City Robbinsville	State NC	
Zip Code 28771	Purpose of Disbursement Newspaper Ad	Transaction ID : SB17.8595.2 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hilton Asheville Biltmore Park</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 3486.35
City Asheville State NC Zip Code 28803	Purpose of Disbursement Room Rental, Food, Beverage - Election Party	Transaction ID : SB17.8595.3
Candidate Name Meadows for Congress	Category/Type 007	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 480.40
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Airfare - DCA to AVL	Transaction ID : SB17.8595.4
Candidate Name Meadows for Congress	Category/Type 002	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 45.00
City Highlands State NC Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.8595.5
Candidate Name Meadows for Congress	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 429.38
City Atlanta State GA Zip Code 30348-5262	Purpose of Disbursement Telephone 001	Transaction ID : SB17.8595.6
Candidate Name <b>Meadows for Congress</b>	Category/Type	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 53.38
City Dallas State TX Zip Code 75266	Purpose of Disbursement Telephone 001	Transaction ID : SB17.8595.7
Candidate Name <b>Meadows for Congress</b>	Category/Type	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Telephone 001 Membership Dues	Transaction ID : SB17.8609
Candidate Name <b>Meadows for Congress</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cardmember Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 2169.92 <b>Transaction ID : SB17.8192</b>
City St. Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement See itemization below	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Hilton Asheville Biltmore Park</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 241.98 <b>Transaction ID : SB17.8192.1</b> <b>[MEMO ITEM]</b>
City Asheville	State NC	
Zip Code 28803	Purpose of Disbursement Hotel	Category/ Type 002
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Hilton Asheville Biltmore Park</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2012
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 120.99 <b>Transaction ID : SB17.8192.3</b> <b>[MEMO ITEM]</b>
City Asheville	State NC	
Zip Code 28803	Purpose of Disbursement Hotel	Category/ Type 002
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2169.92
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ingle's Grocery</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address US 64		Amount of Each Disbursement this Period 63.09
City Cashiers	State NC	Zip Code 28717
Purpose of Disbursement Fuel	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8192.4  [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2012
Mailing Address 2455 Hwy 70 SE		Amount of Each Disbursement this Period 46.95
City Hickory	State NC	Zip Code 28602
Purpose of Disbursement Fuel	Category/ Type 002	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8192.10  [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Omni Shoreham Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 2500 Calvert Street, NW		Amount of Each Disbursement this Period 1031.37
City Washington	State DC	Zip Code 20008
Purpose of Disbursement Hotel	Category/ Type 002	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.8192.12  [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hickory Tavern</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2012
Mailing Address 30 Town Square Blvd, Ste 100		Amount of Each Disbursement this Period 1381.22
City Asheville State NC Zip Code 28803	Category/Type 002	
Purpose of Disbursement Lunch	Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.8192.13 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 45.00
City Highlands State NC Zip Code 28741	Category/Type 001	
Purpose of Disbursement Postage	Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.8192.14 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Cardmember Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 1381.22
City St. Louis State MO Zip Code 63179-0408	Category/Type 001	
Purpose of Disbursement Credit Card Transactions - See Itemization	Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.8554
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1381.22
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Acorns</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 465 Main Street		Amount of Each Disbursement this Period 121.70
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Gifts - Hosts - Fundraisers	Transaction ID : SB17.8554.2
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Hilton Asheville Biltmore Park</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 212.69
City Asheville	State NC	
Zip Code 28803	Purpose of Disbursement Hotel	Transaction ID : SB17.8554.5
Candidate Name <b>Meadows for Congress</b>	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Switzerland Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 86 High Ridge Road		Amount of Each Disbursement this Period 146.64
City Spruce Pine	State NC	
Zip Code 28777	Purpose of Disbursement Dinner	Transaction ID : SB17.8554.6
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 68			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Switzerland Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 86 High Ridge Road		Amount of Each Disbursement this Period 78.22
City Spruce Pine State NC Zip Code 28777	Purpose of Disbursement Breakfast	Transaction ID : SB17.8554.7
Candidate Name Meadows for Congress	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 105.38
City Lexington State KY Zip Code 40503	Purpose of Disbursement Name Badges	Transaction ID : SB17.8554.10
Candidate Name Meadows for Congress	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Western Sizzlin Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 606 West US Hwy 19E Bypass		Amount of Each Disbursement this Period 173.13
City Burnsville State NC Zip Code 28714	Purpose of Disbursement Dinner	Transaction ID : SB17.8554.15
Candidate Name Meadows for Congress	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tammie Crandall</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address P.O. Box 2705		Amount of Each Disbursement this Period 177.08 <b>Transaction ID : SB17.8362</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Reimbursement - Mileage	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 12 Robert Sluder Lane		Amount of Each Disbursement this Period 161.45 <b>Transaction ID : SB17.8295</b>
City Newland	State NC	
Zip Code 28657	Purpose of Disbursement Mileage Reimbursement (at Federal Mileage rate)	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 12 Robert Sluder Lane		Amount of Each Disbursement this Period 195.75 <b>Transaction ID : SB17.8422</b>
City Newland	State NC	
Zip Code 28657	Purpose of Disbursement Mileage Reimbursement (at Federal Mileage Rate)	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	534.28
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 12 Robert Sluder Lane		Amount of Each Disbursement this Period 1170.00 <b>Transaction ID : SB17.8439</b>
City Newland	State NC	
Purpose of Disbursement Compensation - Campaign work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 12 Robert Sluder Lane		Amount of Each Disbursement this Period 44.80 <b>Transaction ID : SB17.8540</b>
City Newland	State NC	
Purpose of Disbursement Mileage Reimbursement (at Federal Mileage rate)		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 12 Robert Sluder Lane		Amount of Each Disbursement this Period 1170.00 <b>Transaction ID : SB17.8583</b>
City Newland	State NC	
Purpose of Disbursement Compensation - Campaign work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2384.80
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. DANNY TARKANIAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 50 S JONES BLVD #202		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8513</b>
City LAS VEGAS	State NV Zip Code 89107	
Purpose of Disbursement Contribution	011 Category/Type	
Candidate Name <b>DANNY TARKANIAN</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 04		

Full Name (Last, First, Middle Initial) <b>B. DAVID ROUZER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address PO BOX 2267		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8519</b>
City SMITHFIELD	State NC Zip Code 27577	
Purpose of Disbursement Contribution	011 Category/Type	
Candidate Name <b>DAVID CHESTON MR. ROUZER</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Beverly L. Elliott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 285 Jenny Gap Road		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : SB17.8435</b>
City Clyde	State NC Zip Code 28721	
Purpose of Disbursement Compensation - Campaign work	001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1375.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Beverly L. Elliott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 285 Jenny Gap Road		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : SB17.8585</b>
City Clyde	State NC	
Purpose of Disbursement Compensation - Campaign work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Beverly L. Elliott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 285 Jenny Gap Road		Amount of Each Disbursement this Period 165.89 <b>Transaction ID : SB17.8612</b>
City Clyde	State NC	
Purpose of Disbursement Reimbursement - Mileage (at Federal rate), telephone		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF FRANK GUINTA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address PO BOX 877		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8514</b>
City MANCHESTER	State NH	
Purpose of Disbursement Contribution		Category/ Type 011
Candidate Name <b>FRANK GUINTA</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1040.89
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. JIM RENACCI FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 150 SMOKERISE DRIVE		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8518</b>
City WADSWORTH State OH Zip Code 44281	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>JAMES B RENACCI</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 16		

Full Name (Last, First, Middle Initial) <b>B. John Wasilchick, llc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 516 Reed Street		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.8292</b>
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Consultant 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Macon Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 220 One Center Court		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.8306</b>
City Franklin State NC Zip Code 28734	Purpose of Disbursement Bank Service Charge 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2020.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Macon Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 220 One Center Court		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.8421</b>
City Franklin	State NC	
Zip Code 28734	Purpose of Disbursement Bank Service Charges	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Macon Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 220 One Center Court		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.8442</b>
City Franklin	State NC	
Zip Code 28734	Purpose of Disbursement Bank Service Charge	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Macon Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 220 One Center Court		Amount of Each Disbursement this Period 7.00 <b>Transaction ID : SB17.8443</b>
City Franklin	State NC	
Zip Code 28734	Purpose of Disbursement Bank Service Charge	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	47.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Martin Air</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 485		Amount of Each Disbursement this Period 1186.42 <b>Transaction ID : SB17.8223</b>
City Sandston State VA Zip Code 23150	Purpose of Disbursement Travel Category/Type 003	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Christopher D. McClure</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 127 Poplar Drive		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.8436</b>
City Clyde State NC Zip Code 28721	Purpose of Disbursement Compensation - Campaign work Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Christopher D. McClure</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 127 Poplar Drive		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.8586</b>
City Clyde State NC Zip Code 28721	Purpose of Disbursement Compensation - Campaign work Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5186.42
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Blake Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. Box 1214		Amount of Each Disbursement this Period 250.89 <b>Transaction ID : SB17.8444</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Reimbursement - Mileage	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.8234</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Reimbursement - Consultant expense	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.8235</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Reimbursement - Consultant expense	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.89
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 199.75 <b>Transaction ID : SB17.8236</b>
City Highlands	State NC	
Purpose of Disbursement Reimbursement - Marketing expense	001	Category/ Type
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.8237</b>
City Highlands	State NC	
Purpose of Disbursement Reimbursement - Consultant expense	001	Category/ Type
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.8636</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - office rent	001	Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1599.75
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial)  
**A. Merchant Bankcard**

Mailing Address 12202 Airport Way, Ste 100

City Broomfield State CO Zip Code 80021

Purpose of Disbursement  
Credit Card Fee

Candidate Name  
**Meadows for Congress**

Office Sought:  House  Senate  President  
State: NC District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 31 / 2012

Amount of Each Disbursement this Period  
74.30

Transaction ID : SB17.8538

Category/Type  
001

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

Mailing Address 116 Wilson Drive

City Morganton State NC Zip Code 28655

Purpose of Disbursement  
Reimbursement - Postage, Office Supplies

Candidate Name  
**Meadows for Congress**

Office Sought:  House  Senate  President  
State: NC District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 22 / 2012

Amount of Each Disbursement this Period  
228.80

Transaction ID : SB17.8293

Category/Type  
001

Full Name (Last, First, Middle Initial)  
**c. Morris Broadband, LLC**

Mailing Address P.O. Box 71086

City Charlotte State NC Zip Code 28272-1086

Purpose of Disbursement  
Cable

Candidate Name  
**Meadows for Congress**

Office Sought:  House  Senate  President  
State: NC District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 19 / 2012

Amount of Each Disbursement this Period  
112.59

Transaction ID : SB17.8227

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 415.69

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. NC Dept of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address P.O. Box 25000		Amount of Each Disbursement this Period 260.00 <b>Transaction ID : SB17.8459</b>
City Raleigh	State NC Zip Code 27640	
Purpose of Disbursement Tax - Robert Doug Crosby	Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Oak Grove Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 2474 Walnut Street, #322		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.8228</b>
City Cary	State NC Zip Code 27518	
Purpose of Disbursement Consultant	Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. PATON FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address PO BOX 68758		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8515</b>
City TUCSON	State AZ Zip Code 85737	
Purpose of Disbursement Contribution	Category/Type 011	
Candidate Name <b>JONATHAN PATON</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AZ District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8760.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A. Public Opinion Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey  
Candidate Name Meadows for Congress  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: NC District: 11

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 10000.00  
Transaction ID : SB17.8520

Category/Type: 005

**B. QGIV**

Full Name (Last, First, Middle Initial)  
Mailing Address 53 Lake Morton Drive

City Lakeland State FL Zip Code 33801

Purpose of Disbursement Credit Card Fee  
Candidate Name Meadows for Congress  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: NC District: 11

Date of Disbursement: 10 / 31 / 2012

Amount of Each Disbursement this Period: 227.81  
Transaction ID : SB17.8539

Category/Type: 001

**c. Rising Tide Media Group, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 226 S. Fayette

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Production of TV Ad  
Candidate Name Meadows for Congress  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: NC District: 11

Date of Disbursement: 10 / 29 / 2012

Amount of Each Disbursement this Period: 8500.00  
Transaction ID : SB17.8420

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 18727.81

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A. ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 435

City SEWICKLEY State PA Zip Code 15143

Purpose of Disbursement Contribution  
Category/Type 011

Candidate Name KEITH MR. ROTHFUS

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: PA District: 12

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 500.00  
Transaction ID : SB17.8516

**B. Patricia H. Shepherd**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 879

City Flat Rock State NC Zip Code 28731

Purpose of Disbursement Office Rent  
Category/Type 001

Candidate Name Meadows for Congress

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: NC District: 11

Date of Disbursement: 10 / 30 / 2012

Amount of Each Disbursement this Period: 1500.00  
Transaction ID : SB17.8437

**c. Patricia Smothers**

Full Name (Last, First, Middle Initial)  
Mailing Address 130 Dalya Road

City Asheville State NC Zip Code 28778

Purpose of Disbursement Mileage Reimbursement (at Federal Mileage Rate)  
Category/Type 003

Candidate Name Meadows for Congress

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: NC District: 11

Date of Disbursement: 10 / 19 / 2012

Amount of Each Disbursement this Period: 35.00  
Transaction ID : SB17.8229

**SUBTOTAL** of Disbursements This Page (optional) ..... 2035.00

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : SB17.8438</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : SB17.8588</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 223.25 <b>Transaction ID : SB17.8589</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Reimbursement - Mileage (at Federal Mileage Rate); Party Supplies 007 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3023.25
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 150 Highlands Square Drive		Amount of Each Disbursement this Period 222.02
City Hendersonville	State NC Zip Code 28792	
Purpose of Disbursement Office Supplies	Category/Type 001	<b>Transaction ID : SB17.8310</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NC District: 11	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Strategic Media Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 3299 K Street, Ste 200		Amount of Each Disbursement this Period 50894.05
City Washington	State DC Zip Code 20007	
Purpose of Disbursement TV/Cable Buy	Category/Type 004	<b>Transaction ID : SB17.8304</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NC District: 11	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Strategic Media Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 3299 K Street, Ste 200		Amount of Each Disbursement this Period 20000.00
City Washington	State DC Zip Code 20007	
Purpose of Disbursement TV/Cable Buy	Category/Type 004	<b>Transaction ID : SB17.8441</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NC District: 11	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	71116.07
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Transfirst</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 12202 Airport Way, Ste 100		Amount of Each Disbursement this Period 31.46 <b>Transaction ID : SB17.8547</b>
City Broomfield State CO Zip Code 80021	Purpose of Disbursement Credit Card Fee 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Unicom</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address P.O.Box 289		Amount of Each Disbursement this Period 57.52 <b>Transaction ID : SB17.8363</b>
City Franklin State NC Zip Code 28744-0289	Purpose of Disbursement Telephone 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 136.00 <b>Transaction ID : SB17.8309</b>
City Dallas State TX Zip Code 75266	Purpose of Disbursement Telephone 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	224.98
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERNON PARKER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 5635 E LINCOLN DRIVE # 18		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.8501</b>
City PARADISE VALLEY State AZ Zip Code 85253	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>VERNON PARKER</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 09		

Full Name (Last, First, Middle Initial) <b>B. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 2530.00 <b>Transaction ID : SB17.8447</b>
City Highlands State NC Zip Code 28741	Purpose of Disbursement Compensation - Campaign work 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 105.00 <b>Transaction ID : SB17.8460</b>
City Highlands State NC Zip Code 28741	Purpose of Disbursement Reimbursement - lunch for volunteers 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3135.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 693.00 <b>Transaction ID : SB17.8591</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Kenneth Douglas West</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 440 Herbert Hills Drive		Amount of Each Disbursement this Period 1600.00 <b>Transaction ID : SB17.8614</b>
City Hayesville	State NC	
Zip Code 28904	Purpose of Disbursement Compensation - Transition	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2293.00
<b>TOTAL</b> This Period (last page this line number only).....	152449.64

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 68	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB19A.8239</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Reimbursement	Category/ Type <b>009</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB19A.8240</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Partial Reimbursement	Category/ Type <b>009</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6000.00</b>



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Transaction ID : **SC/10.4101**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

**Mark R Meadows**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
P.O. Box 811

City State ZIP Code  
Highlands NC 28741

Original Amount of Loan 250000.00	Cumulative Payment To Date 1000.00	Balance Outstanding at Close of This Period 249000.00
--------------------------------------	---------------------------------------	--

**TERMS**

Date Incurred: M 09 / D 29 / Y 2011  
Date Due: M / D / Y none  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 249000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.5693  
**Meadows for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Mark R Meadows</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 811		

City	State	ZIP Code
Highlands	NC	28741

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	5000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 07 / Y 2012	M M / D D / Y none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>TOTALS</b> This Period (last page in this line only).....	249000.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Meadows for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4362

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4364

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mark R Meadows**

Nature of Debt (Purpose):

Marketing - Handout Cards

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

199.75

Transaction ID : SD10.4363

Amount Incurred This Period

0.00

Payment This Period

199.75

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Meadows for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4365

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶