

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Battle for Congress

ADDRESS (number and street)

PO Box 480305

Check if different than previously reported. (ACC)

Charlotte

NC

28269

2. FEC IDENTIFICATION NUMBER ▼

C C00545400

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

NC

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Albert Lee Richardson Jr.

Signature of Treasurer Mr. Albert Lee Richardson Jr.

[Electronically Filed]

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Battle 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))....	65108.11	227167.89
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	64608.11	226667.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48955.87	190605.17
(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)).....	48955.87	190605.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	34264.63	
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).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Battle for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	51550.00	180638.09
(ii) Unitemized.....	8730.00	27694.55
(iii) TOTAL of contributions from individuals ▶	60280.00	208332.64
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1477.61	3077.61
(d) The Candidate.....	3350.50	15757.64
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	65108.11	227167.89
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	6.91
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	65108.11	227174.80

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48955.87	190605.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	500.00
21. OTHER DISBURSEMENTS .....	505.00	1805.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	49960.87	192910.17

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	19117.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	65108.11
25. SUBTOTAL (add Line 23 and Line 24).....	84225.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49960.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	34264.63

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

An inkind contribution was also entered as a disbursement.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**State W Alexander**

Mailing Address 8933 Raven Park Dr

City Charlotte	State NC	Zip Code 28216-1685
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FEC ID number of contributing federal political committee. **C**

Name of Employer Livingstone College	Occupation Executive Assistant to the President,D
---	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FEM2**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 12217 Hortulan Ct

City Huntersville	State NC	Zip Code 28078-5409
----------------------	-------------	------------------------

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

Name of Employer Marvin AME Zion	Occupation Pastor
-------------------------------------	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : VN8VGCEA5F3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3500 Lemsford Way

City Charlotte	State NC	Zip Code 28215-5315
-------------------	-------------	------------------------

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

Name of Employer Wells Fargo	Occupation Manager/ VP
---------------------------------	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : VN8VGCA0BC6**

Amount of Each Receipt this Period  
250.00

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

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

850.00

**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 7 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Renne Baker**

Mailing Address 10653 Stone Bunker Dr

City State Zip Code  
Charlotte NC 28227-7036

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

Name of Employer Occupation  
AME Zion Church Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 09 / 2014

**Transaction ID : VN8VGC6X262**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 10653 Stone Bunker Dr

City State Zip Code  
Charlotte NC 28227-7036

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

Name of Employer Occupation  
AME Zion Church Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2014

**Transaction ID : VN8VGCE1D50**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10653 Stone Bunker Dr

City State Zip Code  
Charlotte NC 28227-7036

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

Name of Employer Occupation  
AME Zion Church Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 27 / 2014

**Transaction ID : VN8VGC6X262**

Amount of Each Receipt this Period  
350.00

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

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

1100.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Battle Jr.**

Mailing Address 18403 Demridge Lane

City Davidson State NC Zip Code 28036

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

Name of Employer AME Zion Church Occupation Bishop

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGCE4NA2**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 18403 Demridge Lane

City Davidson State NC Zip Code 28036

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGCE4NF1**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 715 Templeton Ave

City Charlotte State NC Zip Code 28203-4554

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

Name of Employer Capgemini Occupation IT Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : VN8VCG3G15**

Amount of Each Receipt this Period  
 500.00

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

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

5700.00



**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 9 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John R Belk**

Mailing Address 2931 W. Tyvola Rd

City Charlotte State NC Zip Code 28217

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

Name of Employer Belk, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 06 / 2014**

**Transaction ID : VN8VGBXZ124**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 9611 Providence Rd

City Charlotte State NC Zip Code 28277-0224

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **504.86**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : VN8VCGD7G3**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 3319 Sharon Rd

City Charlotte State NC Zip Code 28211-2660

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE1DE1**

Amount of Each Receipt this Period  
**250.00**

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

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

**1550.00**

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Herbert Blair**

Mailing Address 807 Plumstead Rd

City Charlotte State NC Zip Code 28216-3155

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

Name of Employer Occupation  
AIG Sales Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : VN8VGCACEZ8**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 807 Plumstead Rd

City Charlotte State NC Zip Code 28216-3155

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

Name of Employer Occupation  
AIG Sales Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE1XJ7**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 807 Plumstead Rd

City Charlotte State NC Zip Code 28216-3155

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

Name of Employer Occupation  
AIG Sales Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE4MD3**

Amount of Each Receipt this Period  
**100.00**

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

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

**400.00**

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alicia Bowers**

Mailing Address 518 Hermitage Ct

City State Zip Code  
Charlotte NC 28207-1414

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

Name of Employer Occupation  
CHS Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 23 / 2014

**Transaction ID : VN8VGC55S7**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 6725 Old Providence Rd

City State Zip Code  
Charlotte NC 28226-7735

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

Name of Employer Occupation  
Carousel Group Senior Advisor-Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : VN8VCGD756**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2304 Arden Gate Ln

City State Zip Code  
Charlotte NC 28262-4482

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

Name of Employer Occupation  
Ame Zion Church Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : VN8VGCBD1E5**

Amount of Each Receipt this Period  
250.00

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

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

1400.00

**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 12 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Bright**

Mailing Address 1001 Orion Ct

City State Zip Code  
Merrick NY 11566-1025

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

Name of Employer Occupation  
Sonica Capital Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCGMFR1**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 7904 Honey Fig Rd

City State Zip Code  
Charlotte NC 28277-1961

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

Name of Employer Occupation  
TIAA-CREF HR Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCHDFK6**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 515 N Broadway

City State Zip Code  
Yonkers NY 10701-1925

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

Name of Employer Occupation  
Ame Zion Church Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 17 / 2014

**Transaction ID : VN8VGC9FG09**

Amount of Each Receipt this Period  
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cynara Charles-Pierre**

Mailing Address 847 Putnam Ave

City State Zip Code  
Brooklyn NY 11221-2817

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

Name of Employer Occupation  
JetBlue Airways Communications Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : VN8VGC9FCD3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 503 Birmingham Ct

City State Zip Code  
Rock Hill SC 29732-8446

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

Name of Employer Occupation  
Clinton Junior College President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGCE1R47**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Calvin Cunningham III**

Mailing Address 118 W 3rd Ave

City State Zip Code  
Lexington NC 27292-3024

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

Name of Employer Occupation  
Waste Zero Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 22 / 2014

**Transaction ID : VN8VGCAF0Z3**

Amount of Each Receipt this Period  
250.00

**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 14 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Johnnie Ruth Davis**

Mailing Address 12628 Headquarters Farm Rd

City	State	Zip Code
Charlotte	NC	28262-1579

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

Name of Employer	Occupation
AME Zion Church	Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : VN8VGCBCWY2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew C. Duncan II**

Mailing Address 2336 Rainy Lake St

City	State	Zip Code
Wake Forest	NC	27587-3427

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

Name of Employer	Occupation
Eisai Inc.	Director, HR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 01 / 2014

**Transaction ID : VN8VGCAQT14**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 5233 Sunningdale Dr

City	State	Zip Code
Charlotte	NC	28277-2682

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

Name of Employer	Occupation
Carolinas HealthCare System	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 15 / 2014

**Transaction ID : VN8VGC25279**

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 15 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John DuPuy**

Mailing Address 5233 Sunningdale Dr

City	State	Zip Code
Charlotte	NC	28277-2682

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

Name of Employer	Occupation
Carolinas HealthCare System	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : VN8VGCHF9T4**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 4845 Legacy Dr

City	State	Zip Code
Colfax	NC	27235-9427

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

Name of Employer	Occupation
AME Zion Church	Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 20 / 2014**

**Transaction ID : VN8VGCAF0G4**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 1940 Overhill Rd

City	State	Zip Code
Charlotte	NC	28211-1629

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

Name of Employer	Occupation
Community Building Initiative	Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 30 / 2014**

**Transaction ID : VN8VGC GG F24**

Amount of Each Receipt this Period  
**100.00**

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

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

**500.00**

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

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

FOR LINE NUMBER: PAGE 16 OF 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**John P Erwin**

Mailing Address 501 E Morehead St  
Ste 3

City State Zip Code  
Charlotte NC 28202-2630

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

Name of Employer Occupation  
Erwin Capital President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 11 / 2014

**Transaction ID : VN8VGC255Q2**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 701 W Monroe St

City State Zip Code  
Salisbury NC 28144-5213

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

Name of Employer Occupation  
Livingstone College Vice President for Institutional Advan

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
460.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FH18**

Amount of Each Receipt this Period  
260.00

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

Mailing Address 4839 Greenwood Dr

City State Zip Code  
Gastonia NC 28052-9433

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
385.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 01 / 2014

**Transaction ID : VN8VGBV37S3**

Amount of Each Receipt this Period  
35.00

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

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

795.00



**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory M. Floyd**

Mailing Address 4839 Greenwood Dr

City State Zip Code  
Gastonia NC 28052-9433

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : VN8VGC GD714**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Angelo Frencher II**

Mailing Address 1919 Carlton Ave

City State Zip Code  
Greensboro NC 27406-3208

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

Name of Employer Occupation  
AME Zion Church Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : VN8VGCK4261**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below Online donation

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Fed (Citi Conduit)**

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1070.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : VN8VGCK4261E**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

550.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter Gilchrist**

Mailing Address 16416 Twin Cove Dr

City State Zip Code  
Huntersville NC 28078-8950

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCGRSE3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4625 Cotton Creek Dr

City State Zip Code  
Charlotte NC 28226-3229

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

Name of Employer Occupation  
Carolinas HealthCare System Admin

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : VN8VGC9BA63**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 102 Hunters Ridge Rd

City State Zip Code  
Chapel Hill NC 27517-9017

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

Name of Employer Occupation  
none none

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 05 / 2014

**Transaction ID : VN8VGC66853**

Amount of Each Receipt this Period  
500.00

**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 19 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Larry Griffin, Jr**

Mailing Address 19109 W Catawba Ave  
Ste 200

City State Zip Code  
Cornelius NC 28031-5614

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

Name of Employer Occupation  
Griffin Brothers Leasing, Inc. Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCGT173**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 19109 W Catawba Ave  
Ste 200

City State Zip Code  
Cornelius NC 28031-5614

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

Name of Employer Occupation  
Griffin Brothers Leasing, Inc. Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCGSYS8**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 18212 Peninsula Club Dr

City State Zip Code  
Cornelius NC 28031-5104

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

Name of Employer Occupation  
Griffin Brothers Leasing, Inc. Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCGSNB0**

Amount of Each Receipt this Period  
1000.00

**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: (check only one)	PAGE 20 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Grant Harrison Jr.**

Mailing Address 412 Candlewick Dr

City Salisbury State NC Zip Code 28147-7880

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

Name of Employer Soldiers Memorial AME Zion Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : VN8VGCG14E8**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**J. Wardell Henderson Jr**

Mailing Address 224 Northchase Dr

City Concord State NC Zip Code 28027-5629

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

Name of Employer AME Zion Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : VN8VGCG13P9**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 3320 Coleridge Dr

City Raleigh State NC Zip Code 27609-7204

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

Name of Employer Wood Jackson PLLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 09 / 2014**

**Transaction ID : VN8VGC6XNP7**

Amount of Each Receipt this Period  
**500.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jimmy R. Jenkins Sr.**

Mailing Address 1017 Bringle Ferry Rd

City	State	Zip Code
Salisbury	NC	28144-4723

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

Name of Employer	Occupation
Livingstone College	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FEH8**

Amount of Each Receipt this Period  
1600.00

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

Mailing Address 131 Supreme Ct

City	State	Zip Code
Statesville	NC	28677-2035

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

Name of Employer	Occupation
JMS	Mgmt

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : VN8VGC2KSV7**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6827 Rosemary Ln

City	State	Zip Code
Charlotte	NC	28210-7018

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

Name of Employer	Occupation
Plastic Labeling	Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2014

**Transaction ID : VN8VGC252T9**

Amount of Each Receipt this Period  
150.00

**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 22 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sandy K Johnson**

Mailing Address 6827 Rosemary Ln

City State Zip Code  
Charlotte NC 28210-7018

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

Name of Employer Occupation  
Plastic Labeling Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : VN8VGC3SDT4**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6727 Hwy 62

City State Zip Code  
Burlington NC 27217

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

Name of Employer Occupation  
Phoenix One, Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : VN8VGCCDFZ3**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 3225 W Sugar Creek Rd

City State Zip Code  
Charlotte NC 28269-7314

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

Name of Employer Occupation  
AMEZ Zion Church Executive Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : VN8VGC8X30**

Amount of Each Receipt this Period  
1350.00

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

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

3850.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janice M. Jones**

Mailing Address 3225 W Sugar Creek Rd

City State Zip Code  
Charlotte NC 28269-7314

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

Name of Employer Occupation  
AMEZ Zion Church Executive Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : VN8VGCCDG19**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**William M Jordan III**

Mailing Address 8008 Harrington Woods Rd

City State Zip Code  
Charlotte NC 28269-0787

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

Name of Employer Occupation  
AME Zion Church Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : VN8VGCBD1S2**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**William M Jordan III**

Mailing Address 8008 Harrington Woods Rd

City State Zip Code  
Charlotte NC 28269-0787

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

Name of Employer Occupation  
AME Zion Church Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGCE47E4**

Amount of Each Receipt this Period  
1500.00

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

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

4350.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Konneker Szeker**

Mailing Address 940 Poindexter Dr

City State Zip Code  
Charlotte NC 28209-1318

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

Name of Employer Occupation  
Charlotte Radiology, P.A. Chief Administrative Officer and Gener

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : VN8VGC93DJ9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3201 Commonwealth Ave

City State Zip Code  
Charlotte NC 28205-6224

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

Name of Employer Occupation  
Womble Carlyle Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : VN8VGC83K67**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 470176

City State Zip Code  
Charlotte NC 28247-0176

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

Name of Employer Occupation  
Charlotte-Mecklenburg Schools Director of Facilities Planning

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FES1**

Amount of Each Receipt this Period  
150.00

**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: (check only one)	PAGE 25 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Landers**

Mailing Address 2407 Warburton Rd

City State Zip Code  
Charlotte NC 28211-3620

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : VN8VGC3FVY7**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2355 Olivet Church Rd

City State Zip Code  
Winston Salem NC 27106-9753

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

Name of Employer Occupation  
Goler Memorial AME Zion Church Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : VN8VGCCHKB4**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 610 Olde North Church Rd

City State Zip Code  
Westerville OH 43081-3133

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

Name of Employer Occupation  
Hood Theological Seminary Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : VN8VGCK4229**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Fed (Citi Conduit)**

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1070.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 08 / 2014

**Transaction ID : VN8VGCK4229E**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address 2355 Morton St

City State Zip Code  
Charlotte NC 28208-5149

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

Name of Employer Occupation  
The Law Office of Edana E. Lewis Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : VN8VGCPEW3**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 6000 Fairview Rd  
Ste 655

City State Zip Code  
Charlotte NC 28210-3292

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

Name of Employer Occupation  
Lincoln Derr PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 17 / 2014

**Transaction ID : VN8VGC8PE65**

Amount of Each Receipt this Period  
250.00

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

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

300.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Addie Hudson Lisby**

Mailing Address 306 Oakwood Creek Ln  
Apt 102

City State Zip Code  
Charlotte NC 28262-1197

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

Name of Employer Occupation  
AME Zion Church Editor, Star of Zion

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 17 / 2014

**Transaction ID : VN8VGC9FFE7**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4825 Lawrence Orr Rd

City State Zip Code  
Charlotte NC 28212-2324

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

Name of Employer Occupation  
New Birth Missionary Baptist Church Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 27 / 2014

**Transaction ID : VN8VGCABS82**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4825 Lawrence Orr Rd

City State Zip Code  
Charlotte NC 28212-2324

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

Name of Employer Occupation  
Long and Son Mortuary Funeral Services

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 27 / 2014

**Transaction ID : VN8VGCABYF7**

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 28 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lem Jr. Long**

Mailing Address 4825 Lawrence Orr Rd

City Charlotte State NC Zip Code 28212-2324

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

Name of Employer Long and Son Mortuary Occupation Funeral Services

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : VN8VGCABZ76**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4183 Bristol PI NW

City Concord State NC Zip Code 28027-4510

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

Name of Employer AME Zion Church Occupation Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : VN8VGCBCXW7**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4183 Bristol PI NW

City Concord State NC Zip Code 28027-4510

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

Name of Employer AME Zion Church Occupation Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGCE1DG7**

Amount of Each Receipt this Period  
500.00

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

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

1100.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Reginald H Massey Sr**

Mailing Address 609 Tom Hunter Rd

City State Zip Code  
Charlotte NC 28213-5510

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

Name of Employer Occupation  
Ame Zion Church Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : VN8VGCHF7**

Amount of Each Receipt this Period  
275.00

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

Mailing Address PO Box 1444

City State Zip Code  
Newton NC 28658-1444

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

Name of Employer Occupation  
Charter Communications Field Outager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : VN8VCGD706**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 9926 Parthenon Ct  
Ct. B

City State Zip Code  
Charlotte NC 28262-0282

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

Name of Employer Occupation  
AME Zion Church Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : VN8VGC3R3X7**

Amount of Each Receipt this Period  
200.00

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

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

675.00

**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 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William McKenith**

Mailing Address 9926 Parthenon Ct  
Ct. B

City Charlotte State NC Zip Code 28262-0282

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

Name of Employer AME Zion Church Occupation Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : VN8VGCGZEH9**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 7605 Clarke Ridge Ct

City Charlotte State NC Zip Code 28269-2359

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

Name of Employer Carolinas HealthCare System Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : VN8VGCGMGM0**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 5618 Thompson Rd

City Charlotte State NC Zip Code 28216-2313

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

Name of Employer East Stonewall AME Zion Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : VN8VGCACF22**

Amount of Each Receipt this Period  
**100.00**

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

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

**400.00**

**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 31 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David L. McLendon Sr**

Mailing Address 1515 Lighthouse Ln

City: Kannapolis State: NC Zip Code: 28081-8409

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

Name of Employer: AME Zion Church Occupation: Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **600.00**

Date of Receipt: **03 / 14 / 2014**

**Transaction ID : VN8VGCE1D34**

Amount of Each Receipt this Period: **500.00**

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

Mailing Address 26 Durham Ct

City: Spring Lake State: NC Zip Code: 28390-1658

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

Name of Employer: Ame Zion Church Occupation: General Secretary Director of the Depa

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500.00**

Date of Receipt: **03 / 07 / 2014**

**Transaction ID : VN8VGCCH641**

Amount of Each Receipt this Period: **500.00**

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

Mailing Address 4005 Fifendrum Ln

City: Charlotte State: NC Zip Code: 28216-1725

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

Name of Employer: AME Zion Church Occupation: Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **850.00**

Date of Receipt: **03 / 27 / 2014**

**Transaction ID : VN8VGC GDNH0**

Amount of Each Receipt this Period: **300.00**

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Chris Miller**

Mailing Address 5208 Flintrock Ct

City Greensboro State NC Zip Code 27455-1376

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

Name of Employer Greensboro Pediatricians Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : VN8VGC GD890**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1672 Twin Lakes Rd

City Rock Hill State SC Zip Code 29732-8608

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

Name of Employer Carolina Community Actions, Inc. Occupation State Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : VN8VGC J8WE6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2197 McLaughlin Dr

City Greensboro State NC Zip Code 27406-8578

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

Name of Employer Trinity A.M.E. Zion Church Occupation Pastor/Servant Leader

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : VN8VGC E1XQ6**

Amount of Each Receipt this Period  
100.00

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

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

600.00



**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 33 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brent Moore**

Mailing Address 103 Manchester PI

City Greensboro State NC Zip Code 27410-6012

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

Name of Employer ABM Capital Management Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 16 / 2014**

**Transaction ID : VN8VGBZ4E56**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 103 Manchester PI

City Greensboro State NC Zip Code 27410-6012

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

Name of Employer ABM Capital Management Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : VN8VGC GHHK1**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 7107 Henson Farm Way

City Summerfield State NC Zip Code 27358-9125

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

Name of Employer AME Zion Church Occupation Bishop

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : VN8VGCABTJ1**

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: (check only one)	PAGE 34 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**T.L. 'Fountain' Odom**

Mailing Address PO Box 1631

City Manteo State NC Zip Code 27954-1631

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

Name of Employer The Odom Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 11 / 2014**

**Transaction ID : VN8VGC7AXV7**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 701 W Monroe St

City Salisbury State NC Zip Code 28144-5213

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

Name of Employer Livingstone College Occupation Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : VN8VGCEME03**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 728 Charles Ave

City Charlotte State NC Zip Code 28205-1529

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

Name of Employer Carolinas HealthCare System Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 11 / 2014**

**Transaction ID : VN8VGC84A26**

Amount of Each Receipt this Period  
**200.00**

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

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

**350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Pellin**

Mailing Address 11731 Silverado Ln

City Charlotte State NC Zip Code 28277-3120

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

Name of Employer Mecklenburg County Occupation part time special projects

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : VN8VGCACFD9**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2028 Hopedale Ave

City Charlotte State NC Zip Code 28207-2126

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

Name of Employer Charlotte-Mecklenburg Hospital Authori Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 19 / 2014**

**Transaction ID : VN8VGCCEMKH7**

Amount of Each Receipt this Period  
**600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Bertha E. Pittman**

Mailing Address 325 Oakview Dr Apt 23

City Salisbury State NC Zip Code 28146-6304

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

Name of Employer Cedar Grove AME Zion Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 11 / 2014**

**Transaction ID : VN8VGC7AF60**

Amount of Each Receipt this Period  
**100.00**

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

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

**750.00**

**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 36 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carolyn Pitts**

Mailing Address 4810 Rounding Run Rd

City	State	Zip Code
Charlotte	NC	28277-7648

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

Name of Employer	Occupation
Ame Zion Renaissance Complex	Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FF30**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3801 Sedgewood Cir

City	State	Zip Code
Charlotte	NC	28211-1325

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

Name of Employer	Occupation
Parker Poe	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : VN8VGC9FF14**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3829 Bonwood Dr

City	State	Zip Code
Charlotte	NC	28211-1752

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

Name of Employer	Occupation
Robinson, Bradshaw & Hinson, P.A.	Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : VN8VGC7MYG0**

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 37 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Robinson**

Mailing Address 3829 Bonwood Dr

City Charlotte State NC Zip Code 28211-1752

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

Name of Employer: Robinson, Bradshaw & Hinson, P.A. Occupation: Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **600.00**

Date of Receipt: **03 / 29 / 2014**

**Transaction ID : VN8VGCGBAM6**

Amount of Each Receipt this Period: **100.00**

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

Mailing Address 11004 Tara Glenn Ct Apt 416

City Charlotte State NC Zip Code 28277-2295

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

Name of Employer: Charlotte Mecklenburg Board of Educati Occupation: Legal Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **165.00**

Date of Receipt: **03 / 05 / 2014**

**Transaction ID : VN8VGC82Y3**

Amount of Each Receipt this Period: **25.00**

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

Mailing Address 11004 Tara Glenn Ct Apt 416

City Charlotte State NC Zip Code 28277-2295

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

Name of Employer: Charlotte Mecklenburg Board of Educati Occupation: Legal Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **215.00**

Date of Receipt: **03 / 31 / 2014**

**Transaction ID : VN8VGC82Y3**

Amount of Each Receipt this Period: **50.00**

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

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

**175.00**

**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 38 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BARBARA SHAW**

Mailing Address 5 Pomona N  
Apt 1

City Pikesville State MD Zip Code 21208-2990

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

Name of Employer retired Occupation executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : VN8VGCGBAZ2**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1315 Courtney Commons Ln  
Apt 1334

City Charlotte State NC Zip Code 28217-2910

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

Name of Employer LPL Financial Occupation Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 06 / 2014**

**Transaction ID : VN8VGC6QS46**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1315 Courtney Commons Ln  
Apt 1334

City Charlotte State NC Zip Code 28217-2910

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

Name of Employer LPL Financial Occupation Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : VN8VGC GCAE7**

Amount of Each Receipt this Period  
**100.00**

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

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

**250.00**

**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 39 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Sink**

Mailing Address 3115 Selwyn Ave

City Charlotte State NC Zip Code 28209-3329

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

Name of Employer Charlotte-Mecklenburg Schools Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1149.99**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : VN8VGC33D3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 3115 Selwyn Ave

City Charlotte State NC Zip Code 28209-3329

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

Name of Employer Gallivan White Boyd Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **570.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 09 / 2014**

**Transaction ID : VN8VGC25583**

Amount of Each Receipt this Period  
**70.00**

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

Mailing Address 4129 Swindon Ct

City Charlotte State NC Zip Code 28215-5355

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

Name of Employer AME Zion Church Occupation Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE1XG1**

Amount of Each Receipt this Period  
**200.00**

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

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

**320.00**

**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 40 OF 76
	<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)  
**Battle for Congress**

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

Mailing Address 2122 Dilworth Rd W

City	State	Zip Code
Charlotte	NC	28203-5734

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

Name of Employer	Occupation
Carolina Health Systems	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 09 / 2014

**Transaction ID : VN8VGC251R1**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2122 Dilworth Rd W

City	State	Zip Code
Charlotte	NC	28203-5734

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

Name of Employer	Occupation
Carolina Health Systems	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : VN8VGCCH682**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2017 Garnette Pl

City	State	Zip Code
Charlotte	NC	28216-4805

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

Name of Employer	Occupation
AME Zion Church	Presiding Elder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : VN8VGCCEA5H9**

Amount of Each Receipt this Period  
240.00

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

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

840.00



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

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

FOR LINE NUMBER: PAGE 41 OF 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 2017 Garnette Pl

City State Zip Code  
Charlotte NC 28216-4805

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

Name of Employer Occupation  
AME Zion Church Presiding Elder

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : VN8VGCEABZ2**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 2804 McCombs St

City State Zip Code  
Charlotte NC 28208-6146

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

Name of Employer Occupation  
Livingstone College Athletic Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : VN8VGCABYE9**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 3939 Glenwood Ave  
Apt 207

City State Zip Code  
Raleigh NC 27612-4969

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : VN8VGCCSMY8**

Amount of Each Receipt this Period  
500.00

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

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

710.00

**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 42 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ellen Stankiewicz**

Mailing Address 3939 Glenwood Ave  
Apt 207

City Raleigh State NC Zip Code 27612-4969

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : VN8VGCCSPH9**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1414 Biltmore Dr

City Charlotte State NC Zip Code 28207-2557

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

Name of Employer Carolinas HealthCare System Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : VN8VGCJ0KW6**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1016 Mt Kisco Dr

City Charlotte State NC Zip Code 28213-5834

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

Name of Employer China Grove AME Zion Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : VN8VGC6WV09**

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: PAGE 43 OF 76  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 1016 Mt Kisco Dr

City State Zip Code  
Charlotte NC 28213-5834

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

Name of Employer Occupation  
China Grove AME Zion Church Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 22 / 2014**

**Transaction ID : VN8VGCAF2E2**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 7529 Tynewind Dr

City State Zip Code  
Wake Forest NC 27587-4960

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

Name of Employer Occupation  
AME Zion Church Bishop

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : VN8VGCGDNA7**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 323 E Cama St

City State Zip Code  
Charlotte NC 28217-1703

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

Name of Employer Occupation  
unemployed unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : VN8VGCGDH08**

Amount of Each Receipt this Period  
**35.00**

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

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

**1285.00**

**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 44 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carlous Tyrance**

Mailing Address 11508 Turn Stone Ct

City	State	Zip Code
Charlotte	NC	28226-3985

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE1DA0**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 5516 Silchester Ln

City	State	Zip Code
Charlotte	NC	28215-5324

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

Name of Employer Little Rock A.M.E. Zion Church	Occupation Pastor
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>850.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VN8VGCE1DH5**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1000 Woodhall Dr

City	State	Zip Code
Huntersville	NC	28078-2608

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

Name of Employer AME Zion Church	Occupation Chief Financial Officer
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 17 / 2014**

**Transaction ID : VN8VGC9FFB3**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**

**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 45 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Wheeler**

Mailing Address 920 Queens Rd

City State Zip Code  
Charlotte NC 28207-1632

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

Name of Employer Occupation  
WHEELER COMMUNICATION GROUP President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : VN8VGC3SC22**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4472 Veranda Lake Ct

City State Zip Code  
Greensboro NC 27409-9244

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

Name of Employer Occupation  
St. Stephens A.M.E. Zion Church Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : VN8VGC3NSX0**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO Box 23

City State Zip Code  
Raeford NC 28376-0023

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : VN8VGCHDFG2**

Amount of Each Receipt this Period  
250.00

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

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

600.00

51550.00

**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 46 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charlotte District Lay Council**

Mailing Address 1640 McAllister Dr

City	State	Zip Code
Charlotte	NC	28216-3525

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : VN8VGCMM6G5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Dashew for School Board**

Mailing Address PO Box 11485

City	State	Zip Code
Charlotte	NC	28220-1485

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 340.25

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : VN8VGCABTE0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 340.25

**C.** Full Name (Last, First, Middle Initial)  
**Rembert for County Commission Committee**

Mailing Address 7338 Santorini Ln

City	State	Zip Code
Charlotte	NC	28277-5552

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : VN8VGCBD2C2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

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

\_\_\_\_\_ 890.25

\_\_\_\_\_

**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 47 OF 76
	<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)  
**Battle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Tate for School Board**

Mailing Address 1825 Cochran Pl

City Charlotte State NC Zip Code 28205-3019

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : VN8VGCMN2C4**

Amount of Each Receipt this Period  
 587.36

**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).....

587.36

1477.61

**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 48 OF 76
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>George E Battle III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 12 / 2014	
Mailing Address 11516 Fox Hill Dr		<b>Transaction ID : VN8VGCD9R15</b>	
City State Zip Code Charlotte NC 28269-3167	Amount of Each Receipt this Period 2672.00		
FEC ID number of contributing federal political committee. C H4NC12076	Name of Employer Occupation Charlotte Mecklenburg Schools General Counsel		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15079.14		

Full Name (Last, First, Middle Initial) <b>George E Battle III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014	
Mailing Address 11516 Fox Hill Dr		<b>Transaction ID : VN8VGCHKYC0</b>	
City State Zip Code Charlotte NC 28269-3167	Amount of Each Receipt this Period 678.50		
FEC ID number of contributing federal political committee. C H4NC12076	Name of Employer Occupation Charlotte Mecklenburg Schools General Counsel		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15757.64		
* In-Kind: Catering			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.50
<b>TOTAL</b> This Period (last page this line number only).....	3350.50



**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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 8625 Arbor Creek Dr			Amount of Each Disbursement this Period 29.95
City Charlotte	State NC	Zip Code 28269-0534	
Purpose of Disbursement Account Fee		Candidate Name	Category/ Type 001
Office Sought: <input 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)		Transaction ID : VN7W89RFJF0	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 8625 Arbor Creek Dr			Amount of Each Disbursement this Period 104.32
City Charlotte	State NC	Zip Code 28269-0534	
Purpose of Disbursement Merchant Fees		Candidate Name	Category/ Type 001
Office Sought: <input 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)		Transaction ID : VN7W89RFHX8	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Bank Of America</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 8625 Arbor Creek Dr			Amount of Each Disbursement this Period 248.45
City Charlotte	State NC	Zip Code 28269-0534	
Purpose of Disbursement Merchant Fees		Candidate Name	Category/ Type 001
Office Sought: <input 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)		Transaction ID : VN7W89RFHM7	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.72
<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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 8625 Arbor Creek Dr		Amount of Each Disbursement this Period 29.95
City Charlotte	State NC Zip Code 28269-0534	
Purpose of Disbursement Account Fee	Category/Type 001	<b>Transaction ID : VN7W89RFHW0</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 8625 Arbor Creek Dr		Amount of Each Disbursement this Period 189.38
City Charlotte	State NC Zip Code 28269-0534	
Purpose of Disbursement Merchant Fees	Category/Type 001	<b>Transaction ID : VN7W89RXP3</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Bank Of America</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 8625 Arbor Creek Dr		Amount of Each Disbursement this Period 29.95
City Charlotte	State NC Zip Code 28269-0534	
Purpose of Disbursement Account Fee	Category/Type 001	<b>Transaction ID : VN7W89RXP8</b>
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	249.28
<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 51 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 8625 Arbor Creek Dr		Amount of Each Disbursement this Period 87.75
City Charlotte	State NC	
Zip Code 28269-0534	Purpose of Disbursement Check Order	<b>Transaction ID : VN7W89RXPN4</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. George E Battle III</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 11516 Fox Hill Dr		Amount of Each Disbursement this Period 678.50
City Charlotte	State NC	
Zip Code 28269-3167	Purpose of Disbursement Catering	<b>Transaction ID : VN8VGCHKYC0I</b>
Candidate Name <b>Mr. George E Battle III</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)	* In-Kind Received
State: NC District: 12		

Full Name (Last, First, Middle Initial) <b>c. ExecuBusiness Centers</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 10130 Mallard Creek Rd Ste 300		Amount of Each Disbursement this Period 2575.00
City Charlotte	State NC	
Zip Code 28262-6001	Purpose of Disbursement Rent	<b>Transaction ID : VN7W89PJKW3</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3341.25
<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 52 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. ExecuBusiness Centers</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 10130 Mallard Creek Rd Ste 300		Amount of Each Disbursement this Period 1426.19 <b>Transaction ID : VN7W89RD839</b>
City Charlotte	State NC Zip Code 28262-6001	
Purpose of Disbursement Office Space - Rent	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. ExecuBusiness Centers</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 10130 Mallard Creek Rd Ste 300		Amount of Each Disbursement this Period 1432.80 <b>Transaction ID : VN7W89RFF97</b>
City Charlotte	State NC Zip Code 28262-6001	
Purpose of Disbursement Office Rental	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 230 E W T Harris Blvd		Amount of Each Disbursement this Period 73.77 <b>Transaction ID : VN7W89RFF48</b>
City Charlotte	State NC Zip Code 28262-3492	
Purpose of Disbursement Printing	Category/Type 007	
Candidate Name		
Office Sought: <input 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)	Posters,signs
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2932.76
<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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Goodwin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 5043 Park Rd Apt K		Amount of Each Disbursement this Period 311.61 <b>Transaction ID : VN7W89S04X3</b>
City Charlotte	State NC Zip Code 28209-3594	
Purpose of Disbursement Event Food	Category/Type 007	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Goodwin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 5043 Park Rd Apt K		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : VN7W89RD7D5</b>
City Charlotte	State NC Zip Code 28209-3594	
Purpose of Disbursement Finance Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Goodwin</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 5043 Park Rd Apt K		Amount of Each Disbursement this Period 120.75 <b>Transaction ID : VN7W89RDAV2</b>
City Charlotte	State NC Zip Code 28209-3594	
Purpose of Disbursement Finance Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	832.36
<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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Indigo Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1312 9th St NW FI 2		Amount of Each Disbursement this Period 2900.00
City Washington	State DC Zip Code 20001-4208	
Purpose of Disbursement General Campaign Consulting	Category/Type 001	<b>Transaction ID : VN7W89PK1E3</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Indigo Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1312 9th St NW FI 2		Amount of Each Disbursement this Period 2800.00
City Washington	State DC Zip Code 20001-4208	
Purpose of Disbursement General Consulting	Category/Type 001	<b>Transaction ID : VN7W89RD863</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Indigo Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1312 9th St NW FI 2		Amount of Each Disbursement this Period 2500.00
City Washington	State DC Zip Code 20001-4208	
Purpose of Disbursement General Consulting	Category/Type 001	<b>Transaction ID : VN7W89RD6D3</b>
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8200.00
<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 55 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Byron Ldell Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89PK193</b>
City Raleigh	State NC Zip Code 27609-5078	
Purpose of Disbursement GOTV Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Byron Ldell Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89R43Y9</b>
City Raleigh	State NC Zip Code 27609-5078	
Purpose of Disbursement Field Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Byron Ldell Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RD7Y0</b>
City Raleigh	State NC Zip Code 27609-5078	
Purpose of Disbursement Field Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<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 56 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Byron Ldell Johnson</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RDAA8</b>
City Raleigh	State NC	
Zip Code 27609-5078	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Byron Ldell Johnson</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RD6B7</b>
City Raleigh	State NC	
Zip Code 27609-5078	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. Byron Ldell Johnson</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 1500 Township Cir		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RV8V5</b>
City Raleigh	State NC	
Zip Code 27609-5078	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maya Jones</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 326 Spring St SW		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RDAC4</b>
City Concord	State NC	
Zip Code 28025-5027	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Maya Jones</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 326 Spring St SW		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RFF80</b>
City Concord	State NC	
Zip Code 28025-5027	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. Maya Jones</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 326 Spring St SW		Amount of Each Disbursement this Period 51.00 <b>Transaction ID : VN7W89RV8Q4</b>
City Concord	State NC	
Zip Code 28025-5027	Purpose of Disbursement Postage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1551.00
<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 58 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maya Jones</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 17 / 2014</b>
Mailing Address <b>326 Spring St SW</b>		Amount of Each Disbursement this Period <b>750.00</b> Transaction ID : <b>VN7W89RV8S9</b>
City <b>Concord</b> State <b>NC</b> Zip Code <b>28025-5027</b>	Purpose of Disbursement <b>Field Consulting</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lasting Printing and Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>2803 Industrial Dr</b>		Amount of Each Disbursement this Period <b>542.41</b> Transaction ID : <b>VN7W89PK1G9</b>
City <b>Raleigh</b> State <b>NC</b> Zip Code <b>27609-7815</b>	Purpose of Disbursement <b>Printing</b> Category/Type <b>006</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Valerie S McCrady</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 01 / 2014</b>
Mailing Address <b>2604 Hickory Hwy</b>		Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>VN7W89PK1A1</b>
City <b>Statesville</b> State <b>NC</b> Zip Code <b>28677-9625</b>	Purpose of Disbursement <b>Compliance Consulting</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1792.41</b>
<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 59 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Valerie S McCrady</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 2604 Hickory Hwy		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7W89R4488</b>
City Statesville	State NC	
Purpose of Disbursement Compliance Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Valerie S McCrady</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 2604 Hickory Hwy		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7W89S03C9</b>
City Statesville	State NC	
Purpose of Disbursement Compliance Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Valerie S McCrady</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 2604 Hickory Hwy		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7W89RDB93</b>
City Statesville	State NC	
Purpose of Disbursement Compliance Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<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 60 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Valerie S McCrady</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 2604 Hickory Hwy		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7W89RD6C5</b>
City Statesville State NC Zip Code 28677-9625	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Valerie S McCrady</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 2604 Hickory Hwy		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7W89RV8W3</b>
City Statesville State NC Zip Code 28677-9625	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kimberly Moore-Dudley</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2014
Mailing Address 3505 Hobbs Rd		Amount of Each Disbursement this Period 189.06 <b>Transaction ID : VN7W89RD7E3</b>
City Greensboro State NC Zip Code 27410-2809	Purpose of Disbursement Event-food Candidate Name Category/Type 007	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1189.06
<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 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mosaic Democratic Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 3505 Hobbs Rd		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : VN7W89PK1D5</b>
City Greensboro State NC Zip Code 27410-2809	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Mosaic Democratic Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 3505 Hobbs Rd		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : VN7W89R4470</b>
City Greensboro State NC Zip Code 27410-2809	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Mosaic Democratic Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3505 Hobbs Rd		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : VN7W89RD7X2</b>
City Greensboro State NC Zip Code 27410-2809	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	900.00
<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 62 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mosaic Democratic Strategies</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 3505 Hobbs Rd		Amount of Each Disbursement this Period 300.00
City Greensboro	State NC	
Zip Code 27410-2809	Purpose of Disbursement General Campaign Consulting	<b>Transaction ID : VN7W89RDAF8</b>
Candidate Name	Category/Type 001	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2700.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database Software	<b>Transaction ID : VN7W89PK1F1</b>
Candidate Name	Category/Type 001	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. NORTH CAROLINA DEMOCRATIC PARTY - FEDERAL</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 220 Hillsborough St		Amount of Each Disbursement this Period 100.00
City Raleigh	State NC	
Zip Code 27603-1724	Purpose of Disbursement Table at Event	<b>Transaction ID : VN7W89S03D7</b>
Candidate Name <b>NORTH CAROLINA DEMOCRATIC PARTY - FEDERAL</b>	Category/Type 007	
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3100.00
<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 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. People's Voice Management Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 209 S Summit Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RD8C0</b>
City Charlotte	State NC	
Zip Code 28208-4412	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. People's Voice Management Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 209 S Summit Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RDAE0</b>
City Charlotte	State NC	
Zip Code 28208-4412	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. People's Voice Management Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 209 S Summit Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RFF72</b>
City Charlotte	State NC	
Zip Code 28208-4412	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2250.00
<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 64 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. People's Voice Management Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 209 S Summit Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RV8N8</b>
City Charlotte	State NC	
Zip Code 28208-4412	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Priceline</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 800 Connecticut Ave		Amount of Each Disbursement this Period 113.05 <b>Transaction ID : VN7W89RXT57</b>
City Norwalk	State CT	
Zip Code 06854-1631	Purpose of Disbursement Hotel Room for Consultant	Category/ Type 002
Candidate Name	Office Sought: <input 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: District:	Consultant on site

Full Name (Last, First, Middle Initial) <b>c. Regus Management Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1914 J N Pease Pl		Amount of Each Disbursement this Period 640.00 <b>Transaction ID : VN7W89R4599</b>
City Charlotte	State NC	
Zip Code 28262-4504	Purpose of Disbursement Office Rental	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1503.05
<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 65 OF 76		
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leigh Rose</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 5914 Cabell View Ct		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RDB36</b>
City Charlotte	State NC	
Zip Code 28277-2596	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Leigh Rose</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 5914 Cabell View Ct		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RFFC1</b>
City Charlotte	State NC	
Zip Code 28277-2596	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. Leigh Rose</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 5914 Cabell View Ct		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : VN7W89RV8P6</b>
City Charlotte	State NC	
Zip Code 28277-2596	Purpose of Disbursement Field Consulting	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<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 66 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. SeVIDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 6235 Creek Breeze Rd		Amount of Each Disbursement this Period 500.00
City Charlotte	State NC	
Zip Code 28269-0682	Purpose of Disbursement Canvassing	<b>Transaction ID : VN7W89RV938</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Ellen Stankiewicz</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 2200.00
City Raleigh	State NC	
Zip Code 27612-4969	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : VN7W89PK1B9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Ellen Stankiewicz</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 1800.00
City Raleigh	State NC	
Zip Code 27612-4969	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : VN7W89PK1T8</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<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 67 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ellen Stankiewicz</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 161.00 <b>Transaction ID : VN7W89R3ZP7</b>
City Raleigh	State NC Zip Code 27612-4969	
Purpose of Disbursement Postage Reimbursement	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Ellen Stankiewicz</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : VN7W89R4413</b>
City Raleigh	State NC Zip Code 27612-4969	
Purpose of Disbursement Fundraising Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. Ellen Stankiewicz</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 2800.00 <b>Transaction ID : VN7W89RFF64</b>
City Raleigh	State NC Zip Code 27612-4969	
Purpose of Disbursement Fundraising Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4161.00
<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 68 OF 76	
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ellen Stankiewicz</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 311.46 <b>Transaction ID : VN7W89RFFB3</b>
City Raleigh	State NC Zip Code 27612-4969	
Purpose of Disbursement Stickers for Events	Category/Type 007	Stickers
Candidate Name		
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Ellen Stankiewicz</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 3939 Glenwood Ave Apt 207		Amount of Each Disbursement this Period 271.50 <b>Transaction ID : VN7W89S03V4</b>
City Raleigh	State NC Zip Code 27612-4969	
Purpose of Disbursement Fundraising Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period 115.00 <b>Transaction ID : VN7W89R4565</b>
City Charlotte	State NC Zip Code 28269-2571	
Purpose of Disbursement Postage	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	697.96
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7W89RFFB3

Reimbursement for payment to Dr. Don's Buttons, Badges, and magnets

Form/Schedule:

Transaction ID:

**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 70 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>A. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		24		2014			
M M	/	D D	/	Y Y Y Y												
01		24		2014												
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28269-2571</td> </tr> </table>		City	State	Zip Code	Charlotte	NC	28269-2571	<table border="1"> <tr> <td>82.50</td> </tr> </table>		82.50						
City	State	Zip Code														
Charlotte	NC	28269-2571														
82.50																
Purpose of Disbursement Postage		Transaction ID : VN7W89RD7W4														
Candidate Name		Category/Type														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td> <input checked="" type="checkbox"/> Primary                     <input type="checkbox"/> General                 </td> </tr> <tr> <td></td> <td></td> <td> <input type="checkbox"/> Other (specify)                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>B. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		06		2014			
M M	/	D D	/	Y Y Y Y												
02		06		2014												
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28269-2571</td> </tr> </table>		City	State	Zip Code	Charlotte	NC	28269-2571	<table border="1"> <tr> <td>245.00</td> </tr> </table>		245.00						
City	State	Zip Code														
Charlotte	NC	28269-2571														
245.00																
Purpose of Disbursement postage		Transaction ID : VN7W89RDA67														
Candidate Name		Category/Type														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td> <input checked="" type="checkbox"/> Primary                     <input type="checkbox"/> General                 </td> </tr> <tr> <td></td> <td></td> <td> <input type="checkbox"/> Other (specify)                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>C. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		18		2014			
M M	/	D D	/	Y Y Y Y												
02		18		2014												
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28269-2571</td> </tr> </table>		City	State	Zip Code	Charlotte	NC	28269-2571	<table border="1"> <tr> <td>575.00</td> </tr> </table>		575.00						
City	State	Zip Code														
Charlotte	NC	28269-2571														
575.00																
Purpose of Disbursement Postage		Transaction ID : VN7W89RDBR0														
Candidate Name		Category/Type														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td> <input checked="" type="checkbox"/> Primary                     <input type="checkbox"/> General                 </td> </tr> <tr> <td></td> <td></td> <td> <input type="checkbox"/> Other (specify)                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	902.50
<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 71 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. USPS</b>		M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period 185.00
City Charlotte	State NC	
Zip Code 28269-2571	Purpose of Disbursement Postage	<b>Transaction ID : VN7W89RD5T3</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. USPS</b>		M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period 34.00
City Charlotte	State NC	
Zip Code 28269-2571	Purpose of Disbursement Postage	<b>Transaction ID : VN7W89RFFD9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. USPS</b>		M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period 1.24
City Charlotte	State NC	
Zip Code 28269-2571	Purpose of Disbursement Postage	<b>Transaction ID : VN7W89S01V2</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	220.24
<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 72 OF 76			
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. <b>USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		05		2014
M M	/	D D	/	Y Y Y Y									
03		05		2014									
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period											
City Charlotte State NC Zip Code 28269-2571		<table border="1"> <tr> <td>4.00</td> </tr> </table>		4.00									
4.00													
Purpose of Disbursement Postage		Transaction ID : VN7W89S01W0											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		001											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. <b>USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y									
03		13		2014									
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period											
City Charlotte State NC Zip Code 28269-2571		<table border="1"> <tr> <td>51.00</td> </tr> </table>		51.00									
51.00													
Purpose of Disbursement Postage		Transaction ID : VN7W89RV8J4											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		004											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. <b>USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		14		2014
M M	/	D D	/	Y Y Y Y									
03		14		2014									
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period											
City Charlotte State NC Zip Code 28269-2571		<table border="1"> <tr> <td>170.00</td> </tr> </table>		170.00									
170.00													
Purpose of Disbursement Postage		Transaction ID : VN7W89RV8K2											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		001											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	225.00
<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 73 OF 76		
	<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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 3515 David Cox Rd		Amount of Each Disbursement this Period 536.00
City Charlotte	State NC	
Zip Code 28269-2571		
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

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

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		Candidate Name
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	536.00
<b>TOTAL</b> This Period (last page this line number only).....	47716.59

**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 74 OF 76			
	<input type="checkbox"/> 17 <input checked="" 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)  
**Battle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stephen Landers</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 2407 Warburton Rd		Amount of Each Disbursement this Period 500.00
City Charlotte	State NC	
Zip Code 28211-3620	Purpose of Disbursement Refund of Contribution	<b>Transaction ID : VN7W89RD618</b>
Candidate Name	Category/Type 010	
Office Sought: <input 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: District:		

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

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

# 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 75 OF 76			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mecklenburg County Democratic Party</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 34383			Amount of Each Disbursement this Period 500.00 000.00 100.00 <b>105.00</b>
City Charlotte	State NC	Zip Code 28234-4383	
Purpose of Disbursement Dinner Tickets		Category/ Type 012	<b>Transaction ID : VN7W89S03G0</b>
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>B. NC Film Factory</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 5457 Monroe Rd			Amount of Each Disbursement this Period 500.00 000.00 100.00 <b>100.00</b>
City Charlotte	State NC	Zip Code 28212-5501	
Purpose of Disbursement Event Sponsorship		Category/ Type 007	<b>Transaction ID : VN7W89RFHT4</b>
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>C. NORTH CAROLINA DEMOCRATIC PARTY - FEDERAL</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 220 Hillsborough St			Amount of Each Disbursement this Period 500.00 000.00 300.00 <b>300.00</b>
City Raleigh	State NC	Zip Code 27603-1724	
Purpose of Disbursement Sanford Hunt Frye Dinner Tickets		Category/ Type 011	<b>Transaction ID : VN7W89RFJ35</b>
Candidate Name <b>NORTH CAROLINA DEMOCRATIC PARTY - FEDERAL</b>			
Office Sought: <input 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: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	505.00
<b>TOTAL</b> This Period (last page this line number only).....	505.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21

Transaction ID : VN7W89RFJ35

Tickets for George, Renita, and September

Form/Schedule:

Transaction ID: