

**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

DAVID ROUZER FOR CONGRESS

ADDRESS (number and street)

PO BOX 2267

☐ Check if different than previously reported. (ACC)

SMITHFIELD

NC

27577

2. FEC IDENTIFICATION NUMBER ▼

C C00501643

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NC

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Type or Print Name of Treasurer HEATHER FORD

Signature of Treasurer

HEATHER FORD

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 78

Write or Type Committee Name

**DAVID ROUZER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

	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))....	120457.84	1476009.43
(b) Total Contribution Refunds (from Line 20(d)) .....	5532.24	35680.20
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	114925.60	1440329.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	173867.11	1386270.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	23260.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	173867.11	1363009.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	109731.51	
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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

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

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

Write or Type Committee Name

**DAVID ROUZER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
**Total this Period**
**COLUMN B**  
**Election Cycle Total as of**

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	1	4

(date of general election)

**COLUMN C**  
**Total for**

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	4

(date after general election)

**through**

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

(last day of reporting period)

**11. CONTRIBUTIONS**

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
- (i) Itemized (use Schedule A)

6	9	8	7	9	.	2	9
---	---	---	---	---	---	---	---

8	3	5	3	5	.	3	6
---	---	---	---	---	---	---	---

3	0	0
---	---	---

(ii) Unitemized

3	5	7	8	.	5
---	---	---	---	---	---

4	9	0	1	0	.	5	8
---	---	---	---	---	---	---	---

0
---

(iii) Total of contributions from individuals

7	3	4	5	7	.	8	4
---	---	---	---	---	---	---	---

8	8	4	3	6	.	3	9
---	---	---	---	---	---	---	---

3	0	0
---	---	---

(b) Political Party Committees

5	0	0	.	0	0
---	---	---	---	---	---

2	2	1	8	.	0	5
---	---	---	---	---	---	---

0
---

(c) Other Political Committees

4	6	5	0	.	0	0
---	---	---	---	---	---	---

5	4	9	5	2	8	.	4	5
---	---	---	---	---	---	---	---	---

6	5	0
---	---	---

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	39898.99	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
120457.84	1476009.43	9500
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	4379.71	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	40000.00	0
(b) All Other Loans		
0.00	0.00	0
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	40000.00	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	23260.20	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	14050.00	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
120457.84	1557699.34	9500

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

DAVID ROUZER FOR CONGRESS

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="173867.11"/>	<input type="text" value="1386270.12"/>	<input type="text" value="13322.96"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="40000.00"/>	<input type="text" value="0"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="40000.00"/>	<input type="text" value="0"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="5532.24"/>	<input type="text" value="32480.20"/>	<input type="text" value="5532.24"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
---	---	--

(c) Other Political Committees (such as PACs)

0.00

3200.00

0

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

5532.24

35680.20

5532.24

**21. OTHER DISBURSEMENTS**

1329.69

19567.31

1029.69

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

180729.04

1481517.63

19884.89

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

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

114925.60

1440329.23

3967.76

**IV. NET OPERATING EXPENDITURES**

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

173867.11

1363009.92

13322.96

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

170002.71

120457.84

290460.55

180729.04

109731.51

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

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

FOR LINE NUMBER:

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(check only one)

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

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)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT BARKER

A.

Mailing Address 401 NORTH WOODROW STREET

City

FUQUAY VARINA

State

NC

Zip Code

27526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOB BARKER COMPANY, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5905

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C WILLIAM BARKER

B.

Mailing Address 309 BRADLEY DRIVE

City

WILMINGTON

State

NC

Zip Code

28409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARKER JONES &amp; CO.

Occupation

CPA/CFF, CFE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2014

Transaction ID : SA11AI.5805

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

TINA BARLETTA

C.

Mailing Address 134 LAKE POINT DRIVE

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOME TOWN REALTY

Occupation

REALTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5941

Amount of Each Receipt this Period

250.00

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

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

2250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CLAUDIA H. BARNHILL**

A.

Mailing Address 18221 NC 210 HIGHWAY E

City

IVANHOE

State

NC

Zip Code

28447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SWEET BERRY FARMS, LLC

Occupation

BLUEBERRY PRODUCER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : SA11AI.5810

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT BARNHILL**

B.

Mailing Address 501 SHADY CIRCLE DRIVE

City

ROCKY MOUNT

State

NC

Zip Code

27803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARNHILL CONTRACTING COMPANY

Occupation

CHAIRMAN OF THE BOARD AND CHIEF EXE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : SA11AI.5802

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**LON J. BEASLEY**

C.

Mailing Address 2626 S NC 903 HWY

City

MAGNOLIA

State

NC

Zip Code

28453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NASH JOHNSON &amp; SONS FARMS

Occupation

MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5872

Amount of Each Receipt this Period

2000.00

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

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

3500.00



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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**STEVEN D BELL**

Mailing Address 9 GRANVILLE OAKS CT

City

GREENSBORO

State

NC

Zip Code

27408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BELL PARTNERS INC.Occupation  
CHAIRMAN AND CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11AI.5740

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**NINA DARLING BENNETT**

Mailing Address 45 CALABRIA COURT

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5928

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**MARTY BIZZELL**

Mailing Address 1026 BROOKHILL DRIVE

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BASS, NIXON & KENNEDY, INCOccupation  
CIVIL ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5933

Amount of Each Receipt this Period

250.00

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

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

700.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILSON BLACKMON****A.**

Mailing Address PO BOX 2318

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WE BLACKMON CONSTRUCTION

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5911**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MELBA GAIL BOWLES****B.**

Mailing Address 607 CURTIS ROAD

City

WARSAW

State

NC

Zip Code

28398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

**Transaction ID : SA11AI.5859**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JANTZEN STONE BRANTLEY****C.**

Mailing Address 490 OLD CAMP ROAD

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE APPRAISER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

**Transaction ID : SA11AI.5878**

Amount of Each Receipt this Period

2000.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TOM BUFFKIN****A.**

Mailing Address PO BOX DRAWER 228

City

GOLDSBORO

State

NC

Zip Code

27533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FRANKLIN BAKING CO.Occupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5867

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**DALLAS M CAMPBELL JR****B.**

Mailing Address PO BOX 637

City

ELIZABETHTOWN

State

NC

Zip Code

28337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAMPBELL OIL & GAS COMPANYOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11AI.5748

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**LYNDA CARROLL****C.**

Mailing Address 100 QUAIL RUN

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
1270 WMPMOccupation  
GENERAL MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11AI.6012

Amount of Each Receipt this Period

250.00

**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:

PAGE 12 OF 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN F. CHANEY

A.

Mailing Address 305 VISTAMAR DRIVE

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHN F. CHANEY CONSTRUCTION

Occupation

CONTRACTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1568.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5871

Amount of Each Receipt this Period

18.71

Full Name (Last, First, Middle Initial)

PAUL D. COLVIN

B.

Mailing Address 1701 SOUTH MOORINGS DRIVE

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PPD

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Transaction ID : SA11AI.5998

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

MICHAEL COSTABILE

C.

Mailing Address PO BOX 171

City

BOLIVIA

State

NC

Zip Code

28422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRECISION TIME

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5942

Amount of Each Receipt this Period

1000.00

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

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

1118.71

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DONALD CREASY****A.**

Mailing Address 1577 SHOTWELL ROAD

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAROTHERS PROPERTIES, LLC

Occupation

REAL ESTATE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

**Transaction ID : SA11AI.5753**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**G. PHILLIP DAVID****B.**

Mailing Address 1516 DAWSON STREET

City

WILMINGTON

State

NC

Zip Code

28401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVID &amp; ASSOCIATES

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

**Transaction ID : SA11AI.5946**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**ROGER DAVIS****C.**

Mailing Address 541 ALBRITTON ROAD

City

CALYPSO

State

NC

Zip Code

28325

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

**Transaction ID : SA11AI.5901**

Amount of Each Receipt this Period

200.00

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

1500.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JAMES DIMUZIO, JR.**

Mailing Address 615 WEDGEWOOD DRIVE

City

WHITEVILLE

State

NC

Zip Code

28472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COASTAL CAROLINA ENTOccupation  
PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11AI.6005

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PAUL DUNN**

Mailing Address 101 CAROLYN DRIVE

City

BENSON

State

NC

Zip Code

27504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MULE CITY FEEDOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11AI.5938

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**N. KIRK EDGERTON**

Mailing Address 9144 SUTHERLAND COURT

City

RALEIGH

State

NC

Zip Code

27615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LAMAR ADVERTISINGOccupation  
SALES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

268.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2014

Transaction ID : SA11AI.5961

Amount of Each Receipt this Period

18.71

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

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

1018.71

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

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

FOR LINE NUMBER: PAGE 15 OF 78  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DAVID ROUZER FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>N. KIRK EDGERTON</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 9144 SUTHERLAND COURT			<b>Transaction ID : SA11AI.5917</b>	
City	State	Zip Code		
RALEIGH	NC	27615		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer LAMAR ADVERTISING		Occupation SALES		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 368.71		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MELVIN R. EDWARDS</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address PO BOX 389			<b>Transaction ID : SA11AI.5893</b>	
City	State	Zip Code		
PRINCETON	NC	27569		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer EDWARDS VINE & SONS INC.		Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>VAN ELLEN EURE</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014	
Mailing Address 10709 BEAVER POND LANE			<b>Transaction ID : SA11AI.5799</b>	
City	State	Zip Code		
RALEIGH	NC	27614		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00	
Name of Employer ANGUS BARN		Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1600.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PAUL E. FLAHERTY****A.**

Mailing Address 108 PISGAH DRIVE

City

GARNER

State

NC

Zip Code

27529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOME TOWNE COMMERCIAL REALTY

Occupation

REALTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5919**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**RICHARD FLEMING****B.**

Mailing Address PO BOX 907

City

WHITVILLE

State

NC

Zip Code

28472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5908**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THEODORE M. FOWLER****C.**

Mailing Address 13520 DURANT ROAD

City

RALEIGH

State

NC

Zip Code

27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN CORRAL CORP

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

**Transaction ID : SA11AI.5804**

Amount of Each Receipt this Period

1000.00

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

2250.00



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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID FUSSELL

A.

Mailing Address 231 RED FOX RUN DRIVE

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUPLIN WINERY

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : SA11AI.5811

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JENNY GILBERT

B.

Mailing Address 273 C BLUE POND ROAD

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCRIPTUREART, LLC

Occupation

OFFICE MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5921

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MARK E GOLDHABER

C.

Mailing Address 8013 WAVENDON COURT

City

RALEIGH

State

NC

Zip Code

27615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDHABER POLICY SERVICES

Occupation

CONSULTANT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

687.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11AI.5964

Amount of Each Receipt this Period

187.10

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

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

1687.10

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SUSAN GOSSMAN

A.

Mailing Address 148 CARDINAL CREST DRIVE

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FEDERAL GOVERNMENT AFFAIRS

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5850

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

LOUISE C. GRAHAM

B.

Mailing Address 545 ARBORETUM DRIVE

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

Transaction ID : SA11AI.5890

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

A. DIAL GRAY III

C.

Mailing Address PO BOX 455

City

WHITEVILLE

State

NC

Zip Code

28472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLUMBUS COUNTY WHSE. INC.

Occupation

OWNER/OPERATOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SA11AI.5819

Amount of Each Receipt this Period

250.00

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

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

1750.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

R. COKE GRAY

A.

Mailing Address 1412 SPIVEY ROAD

City

WHITEVILLE

State

NC

Zip Code

28472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

USDA- FARM SERVICE AGENCY

Occupation

COUNTY EXECUTIVE DIRECTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2014

Transaction ID : SA11AI.5960

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DAVID GRECO

B.

Mailing Address 415 HOLLY CIRCLE

City

WHITEVILLE

State

NC

Zip Code

28472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WALTERS SURGICAL ASSOCIATES

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5936

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARSHALL L. GURLEY SR.

C.

Mailing Address PO BOX 90997

City

RALEIGH

State

NC

Zip Code

27675

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11AI.5853

Amount of Each Receipt this Period

250.00

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:

PAGE 20 OF 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROGER HALL, JR.

A.

Mailing Address 118 BAYSHORE DRIVE

City

PARKTON

State

NC

Zip Code

28371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE SALES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RHONDA HARRINGTON

B.

Mailing Address 4802 LAKE HILLS DRIVE

City

WILSON

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.5886

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

RHONDA HARRINGTON

C.

Mailing Address 4802 LAKE HILLS DRIVE

City

WILSON

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.5889

Amount of Each Receipt this Period

600.00

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

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

3100.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EMORY F. HOWARD

A.

Mailing Address 205 HOLLY CIRCLE

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5923

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DUANE L. ISCHER

B.

Mailing Address 4429 HARBOURGATE DRIVE

City

RALEIGH

State

NC

Zip Code

27612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

Transaction ID : SA11AI.5800

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

PEMBROKE N JENKINS

C.

Mailing Address 2108 SOUTH LIVE OAK PARKWAY

City

WILMINGTON

State

NC

Zip Code

28403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TURN BULL LUMBER COMPANY

Occupation

BUSINESSMAN

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SA11AI.5989

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EDNA H. JOHNSON

A.

Mailing Address 105 SASSARIXA TRAIL

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11AI.5821

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

EDNA H. JOHNSON

B.

Mailing Address 105 SASSARIXA TRAIL

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : SA11AI.5986

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERT C. JOHNSON

C.

Mailing Address 342 NASH JOHNSON POND ROAD

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RAEFORD FARMS

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5875

Amount of Each Receipt this Period

1000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JERRY B. JOHNSON

A.

Mailing Address 1119 CANAL DRIVE

City

CAROLINA BEACH

State

NC

Zip Code

28428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11AI.5963

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDGAR MARVIN JOHNSON

B.

Mailing Address PO BOX 699

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOUSE OF RAEFORD

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5877

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

NASH JULIAN JOHNSON

C.

Mailing Address 342 NASH JOHNSON ROAD

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5879

Amount of Each Receipt this Period

2000.00

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMY THOMAS JOHNSON**

Mailing Address 126 PILOT HOUSE DRIVE

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 23 2014

Transaction ID : SA11AI.5874

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**KRISTAL M. JONES**

Mailing Address 1889 COKER STORE ROAD

City

MOUNT OLIVE

State

NC

Zip Code

28365

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 27 2014

Transaction ID : SA11AI.5891

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THERESA KOSTRZEWA**

Mailing Address 2349 CHURCHILL ROAD

City

RALEIGH

State

NC

Zip Code

27608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL ADVANTAGE ASSOCIATES, INC.

Occupation

CONSULTANT

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y  
10 29 2014

Transaction ID : SA11AI.5909

Amount of Each Receipt this Period

1000.00

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

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

4000.00



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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICKEY SHAWN LAMM

A.

Mailing Address 2191 VINSON ROAD

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing federal political committee.

C

Name of Employer

LAMM MEDIA GROUP, LLC

Occupation

VICE PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.5887

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MARJORIE B. LAMM

B.

Mailing Address 1667 NC HIGHWAY 96 SOUTH

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing federal political committee.

C

Name of Employer

WMPM

Occupation

OFFICE MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11AI.5808

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

MARJORIE B. LAMM

C.

Mailing Address 1667 NC HIGHWAY 96 SOUTH

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing federal political committee.

C

Name of Employer

WMPM

Occupation

OFFICE MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.5888

Amount of Each Receipt this Period

1000.00

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

2100.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROSS LAMPE

A.

Mailing Address 711 CRESCENT DRIVE

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUY C. LEE MFG CO.Occupation  
LUMBER SALES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11AI.5945

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

ANTHONY LAMPURI

B.

Mailing Address 104 MARSBURG LANE

City

CARY

State

NC

Zip Code

27519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ABL & ASSOCIATES PLUMBINGOccupation  
EXECUTIVE VICE PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5932

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERT J LEAHY

C.

Mailing Address 622 JASMINE LANE

City

SUNSET BEACH

State

NC

Zip Code

28468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SA11AI.5857

Amount of Each Receipt this Period

50.00

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

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PAGE 27 OF 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM FRANK LEE****A.**

Mailing Address 1416 WAL PAT ROAD

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

**Transaction ID : SA11AI.5885**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**K. ELAINE LEGGETT****B.**

Mailing Address 7003 TRAILMARK ROAD

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARKER, JONES &amp; CO., CPA

Occupation

CPA

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5912**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**CALVIN E. LEWIS JR****C.**

Mailing Address 1121 ESSEX DRIVE

City

WILMINGTON

State

NC

Zip Code

28403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEWIS FARMS

Occupation

FARMER

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2014

**Transaction ID : SA11AI.6016**

Amount of Each Receipt this Period

2000.00

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

4850.00

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

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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WALTER MADSEN****A.**

Mailing Address 4402 POLLY GULLY COURT, SE

City

SOUTHPORT

State

NC

Zip Code

28461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.5896

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**JOSEPH MARTIN****B.**Mailing Address 609A PINER ROAD  
UNIT 187

City

WILMINGTON

State

NC

Zip Code

28409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5884

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ANN MAXWELL****C.**

Mailing Address 616 LAKESHORE DRIVE

City

GOLDSBORO

State

NC

Zip Code

27534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAXWELL INTERIORS

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SA11AI.5899

Amount of Each Receipt this Period

500.00

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

1200.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KYLE H. MCINTYRE

A.

Mailing Address 1938 S LIVE OAK PARKWAY

City

WILMINGTON

State

NC

Zip Code

28403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KHM HOLDINGS, LLCOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11AI.5741

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DONOVAN MCLAURIN

B.

Mailing Address PO BOX 97

City

WADE

State

NC

Zip Code

28395

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DONOVAN E. MCLAURIN, CO.Occupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2014

Transaction ID : SA11AI.5798

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RAINELLE D. MISHOE

C.

Mailing Address 825 FOX RIDGE LANE

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTRACOASTAL REALTY CORPOccupation  
REAL ESTATE BROKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11AI.6009

Amount of Each Receipt this Period

100.00

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

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

2100.00

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HARMON W. MISHOE****A.**

Mailing Address 825 FOX RIDGE LANE

City

WILMINGTON

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONWIDE INSURANCE

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SA11AI.6010**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**MIKE MORRISON****B.**

Mailing Address 208 FOREST OAKS DRIVE

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GSF MORTGAGE CORP

Occupation

REAL ESTATE FINANCE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

**Transaction ID : SA11AI.5866**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**UYEN NGUYEN****C.**

Mailing Address 222 PARKRIDGE DRIVE

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GX1 OUTDOOR POWER

Occupation

VP MARKETING

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5922**

Amount of Each Receipt this Period

250.00

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

600.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRY W. PARTLO

A.

Mailing Address 435 HIGHWAY 42 EAST

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIRECT DISTRIBUTORS INC.

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5929

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GLENN PIERCE

B.

Mailing Address 5300 TEN TEN ROAD

City

APEX

State

NC

Zip Code

27539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PIERCE GROUP BENEFITS

Occupation

INSURANCE BROKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11AI.5861

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ANNE G. PLAGE

C.

Mailing Address 807 WOOD COVE ROAD

City

WILMINGTON

State

NC

Zip Code

28409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROBERT PLAGUE, DDS

Occupation

PERSONAL ASSISTANT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5865

Amount of Each Receipt this Period

500.00

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  
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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**POINT DRIVE LLC**

**A.**

Mailing Address 118 POINT DRIVE

City

WILMINGTON

State

NC

Zip Code

28411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4400.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2014

**Transaction ID : SA11AI.6000**

Amount of Each Receipt this Period

800.00

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

**JOHN B. DALTON**

**B.**

Mailing Address 118 POINT DRIVE

City

WILMINGTON

State

NC

Zip Code

28411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW HANOVER RENT-A-CAR/AVIS

Occupation

CAR RENTAL SALES

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4900.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2014

**Transaction ID : SA11AI.6001**

Amount of Each Receipt this Period

800.00

**[MEMO ITEM]**

PARTNERSHIP ATTRIBUTION POINT DRIVE LLC

Full Name (Last, First, Middle Initial)

**WENDI K. POWELL**

**C.**

Mailing Address PO BOX 415

City

LUCAMA

State

NC

Zip Code

27851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOWELL MILL RESTAURANT

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : SA11AI.5792**

Amount of Each Receipt this Period

2600.00

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

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

3400.00



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

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

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>JOHN P. PREYER</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 214 GLENBURNIE STREET			Transaction ID : SA11AI.5751	
City CHAPEL HILL	State NC	Zip Code 27514	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RESTORATION SYSTEMS		Occupation COO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) <b>JOHNATHAN RICHARD PULLEYN</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 163 DAFFODIL LANE			Transaction ID : SA11AI.5927	
City CLAYTON	State NC	Zip Code 27527	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PARRISH, PULLEYN & YOUNG		Occupation PARTNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>KIM QUINN</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address PO BOX 336			Transaction ID : SA11AI.6008	
City KENANSVILLE	State NC	Zip Code 28349	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer KMQ INC.		Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....			2750.00	
TOTAL This Period (last page this line number only).....				

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RUTH QUINN****A.**

Mailing Address 925 BALA LANE

City

WILMINGTON

State

NC

Zip Code

28409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

**Transaction ID : SA11AI.5864**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**R. MAX RAYNOR JR.****B.**

Mailing Address PO BOX 280

City

BENSON

State

NC

Zip Code

27504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROFESSIONAL EYE CARE

Occupation

OPTOMETRIST

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

**Transaction ID : SA11AI.5750**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**MICHAEL RICCOBENE****C.**

Mailing Address 202 ROSSELLINI PLACE

City

CARY

State

NC

Zip Code

27518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RICCOBENE &amp; ASSOCIATES FAMILY DENTIS

Occupation

DENTIST

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SA11AI.5988**

Amount of Each Receipt this Period

1000.00

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

3700.00

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT E. RICHTER**
**A.**

Mailing Address 16215 NE 25TH AVENUE

City

RIDGEFIELD

State

WA

Zip Code

98642

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SA11AI.5855**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**JENNIFER J. RIPPY**
**B.**

Mailing Address 100 WINDLASS DRIVE

City

WILMINGTON

State

NC

Zip Code

28409

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

WRIGHTSVILLE FARM MANAGEMENT

Occupation

PRINCIPAL

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

**Transaction ID : SA11AI.6027**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CHERYL ROSE**
**C.**

Mailing Address 2687 OLD BAILEY HIGHWAY

City

NASHVILLE

State

NC

Zip Code

27856

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

JR. ROSE &amp; SONS, INC

Occupation

BOOKKEEPER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

**Transaction ID : SA11AI.5809**

Amount of Each Receipt this Period

250.00

**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)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BOB SATTERFIELD****A.**

Mailing Address 2045 WALDEN WAY

City

CLAYTON

State

NC

Zip Code

27527

FEC ID number of contributing federal political committee.

C

Name of Employer

SIGNAGE

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11AI.5926**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**J. ANDREW SAYRE****B.**

Mailing Address PO BOX 3259

City

BALD HEAD ISLAND

State

NC

Zip Code

28461

FEC ID number of contributing federal political committee.

C

Name of Employer

BALD HEAD ISLAND

Occupation

MAYOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

**Transaction ID : SA11AI.5985**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**TED SEAWELL****C.**

Mailing Address PO BOX 16325

City

WILMINGTON

State

NC

Zip Code

28408

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

**Transaction ID : SA11AI.5953**

Amount of Each Receipt this Period

100.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PHILIP STARR

A.

Mailing Address 414 S. 3RD STREET

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REALTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5930

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

URSULA H. STEWART

B.

Mailing Address 121 DOGWOOD LANE

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNSTON COUNTY SCHOOLS

Occupation

TEACHER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5916

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

REGINALD STRICKLAND

C.

Mailing Address 1642 COUNTRY CLUB ROAD

City

MOUNT OLIVE

State

NC

Zip Code

28365

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STRICKLAND FARMS, INC

Occupation

OWNER/FARMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		17		2014

Transaction ID : SA11AI.5797

Amount of Each Receipt this Period

1000.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DONALD TABER

Mailing Address 6853 MAIN STREET

234B

City

WILMINGTON

State

NC

Zip Code

38405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOUSE OF RAEFORD FARMS, INC

Occupation

MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11AI.5966

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

H. MAC TYSON

Mailing Address 4647 MAIN STREET

SUITE 11

City

SHALLOTTE

State

NC

Zip Code

28470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5918

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

SALVATORE J VILLARI

Mailing Address 315 OAK AVENUE

City

WOODBURY HEIGHTS

State

NJ

Zip Code

08097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S&amp;J VILLARI LIVESTOCK

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period

100.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RON DARRERLL WALKER

Mailing Address 2807 BRITTANY DRIVE

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOME TOWNE REALTY

Occupation

REALTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. JULIE M. WARD

Mailing Address PO BOX 863

City

CLARKTON

State

NC

Zip Code

28433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11AI.5944

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. CRAIG WEST

Mailing Address 1395 NC HIGHWAY 222 EAST

City

FREMONT

State

NC

Zip Code

27830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11AI.5749

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EMILY B. WHALEY

A.

Mailing Address PO BOX 256

City

BEULAVILLE

State

NC

Zip Code

28518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUPLIN GENERAL HOSPITAL

Occupation

NURSE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SA11AI.5820

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

EMILY B. WHALEY

B.

Mailing Address PO BOX 256

City

BEULAVILLE

State

NC

Zip Code

28518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUPLIN GENERAL HOSPITAL

Occupation

NURSE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5876

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DONNA M. WHITE

C.

Mailing Address 1330 W MAIN STREET

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DHHS

Occupation

R.N.

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11AI.5913

Amount of Each Receipt this Period

100.00

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

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

1200.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRY WOODARD

A.

Mailing Address 208 UWHARRIE COURT

City

GARNER

State

NC

Zip Code

27529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HTR GROUP

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2377.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11AI.5955

Amount of Each Receipt this Period

1454.77

IN-KIND:

FOOD/BEVERAGE/RENTAL/ENTERTAINMENT

Full Name (Last, First, Middle Initial)

WESLEY A. WOOTEN

B.

Mailing Address 8155 MALPASS CORNER ROAD

City

CURRIE

State

NC

Zip Code

28435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5856

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JOYCE H. WOOTEN

C.

Mailing Address 805 ROBINWOOD STREET

City

BURGAW

State

NC

Zip Code

28425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOOTEN FARMING &amp; SEED

Occupation

AGRIBUSINESS

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11AI.5862

Amount of Each Receipt this Period

250.00

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

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

1804.77

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

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

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NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLARK H. WOOTEN

Mailing Address 1250 EASY STREET

City

DUNN

State

NC

Zip Code

28334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRI STATE TURF

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11Al.5943

Amount of Each Receipt this Period

2600.00

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

Amount of Each Receipt this Period

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 M	/	D 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).....

2600.00

69879.29

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHNSTON RW**

**A.**

Mailing Address PO BOX 137

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2014

**Transaction ID : SA11B.5934**

Amount of Each Receipt this Period

500.00

NON FEDERAL POLITICAL COMMITTEE;  
FEDERALLY PERMISSABLE SOURCES

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALTRIA GROUP, INC PAC (ALTRIAPAC)**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 400W

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 21 2014

Transaction ID : SA11C.5816

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE, NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00004275

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 05 2014

Transaction ID : SA11C.6015

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN DENTAL ASSOCIATION PAC**

Mailing Address 1111-14TH STREET NW  
SUITE 1100

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00000729

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 23 2014

Transaction ID : SA11C.5881

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

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(check only one)

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<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)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BEEF-PAC (BEEF PAC OF TEXAS CATTLE FEEDERS ASSOCIATION)**

Mailing Address 5501 WEST I-40

City

AMARILLO

State

TX

Zip Code

79106

FEC ID number of contributing  
federal political committee.

**C** C00015552

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11C.6007

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CENTURYLINK INC EMPLOYEES PAC**

Mailing Address 1099 NEW YORK AVENUE, NW  
SUITE 250

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00419911

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

11 / 04 / 2014

Transaction ID : SA11C.6003

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COMPETITIVE CARRIERS ASSOCIATION (CCA) PAC**

Mailing Address 805 15TH STREET, NW  
SUITE 401

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00490698

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11C.6006

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

 Use separate schedule(s)  
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<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)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CONAGRA FOODS, INC GOOD GOVERNMENT ASSOCIATION**

Mailing Address ONE CONAGRA DRIVE

City

OMAHA

State

NE

Zip Code

68102

 FEC ID number of contributing  
 federal political committee.

**C** C00087874

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

**Transaction ID : SA11C.5898**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CONSERVATIVE ROUNDTABLE**

Mailing Address PO BOX 97275

City

RALEIGH

State

NC

Zip Code

27624

 FEC ID number of contributing  
 federal political committee.

**C** C00549725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

**Transaction ID : SA11C.5950**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CROPLIFE AMERICA PAC**

 Mailing Address 1156 15TH STREET NW  
 SUITE 400

City

WASHINGTON

State

DC

Zip Code

20005

 FEC ID number of contributing  
 federal political committee.

**C** C00248849

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

**Transaction ID : SA11C.5812**

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAIRY FARMERS OF AMERICA, INC. (DE) PAC**

Mailing Address PO BOX 909700

City

KANSAS CITY

State

MO

Zip Code

64190

 FEC ID number of contributing  
 federal political committee.

**C** C00001388

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

**Transaction ID : SA11C.5897**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City

MCLEAN

State

VA

Zip Code

22102

 FEC ID number of contributing  
 federal political committee.

**C** C00040998

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11C.5904**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**EXCELSIOR PAC**

 Mailing Address 2470 DANIELLS BR RD  
 SUITE 121

City

ATHENS

State

GA

Zip Code

30606

 FEC ID number of contributing  
 federal political committee.

**C** C00541078

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

**Transaction ID : SA11C.5814**

Amount of Each Receipt this Period

500.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FARM CREDIT COUNCIL PAC**

**A.**

Mailing Address 50 F STREET NW

SUITE 900

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00193631

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 20 / 2014

**Transaction ID : SA11C.5817**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**FARM CREDIT COUNCIL PAC**

**B.**

Mailing Address 50 F STREET NW

SUITE 900

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00193631

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 23 / 2014

**Transaction ID : SA11C.5880**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FLOWERS INDUSTRIES, INC PAC (FLOPAC)**

**C.**

Mailing Address 1919 FLOWERS CIRCLE

City

THOMASVILLE

State

GA

Zip Code

21757

FEC ID number of contributing  
federal political committee.

**C** C00033555

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 23 / 2014

**Transaction ID : SA11C.5882**

Amount of Each Receipt this Period

2500.00

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

5500.00

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



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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GENERAL DYNAMICS CORPORATION (GDC) PAC**

**A.**

Mailing Address 2941 FARVIEW PARK DRIVE

#100

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

**C** C00078451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 30 2014

**Transaction ID : SA11C.5947**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GLAXOSMITHKLINE LLC (GSK) PAC**

**B.**

Mailing Address FIVE MOORE DRIVE

PO BOX 13358

City

RESEARCH TRIANGLE

State

NC

Zip Code

27709

FEC ID number of contributing  
federal political committee.

**C** C00199703

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 05 2014

**Transaction ID : SA11C.6013**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. (INSURPAC)**

**C.**

Mailing Address 20 F STREET, NW

SUITE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 16 2014

**Transaction ID : SA11C.5762**

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INTERNATIONAL COUNCIL OF SHOPPING CENTERS, INC. (ICSC) PAC**

**A.**

Mailing Address 555 12TH STREET, NW  
SUITE 660

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

**C** C00217638

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11C.5907**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (MARSHA/WEDGE) PAC**

**B.**

Mailing Address PO BOX 680063

City	State	Zip Code
FRANKLIN	TN	37068

FEC ID number of contributing federal political committee.

**C** C00409276

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

**Transaction ID : SA11C.6014**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**MCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

**C.**

Mailing Address ONE POST STREET  
34TH FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94104

FEC ID number of contributing federal political committee.

**C** C00108035

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

**Transaction ID : SA11C.5806**

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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

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<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)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC****A.**

Mailing Address 2901 TELESTAR COURT

City

FALLS CHURCH

State

VA

Zip Code

22042

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

C00005249

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

**Transaction ID : SA11C.5910**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON****B.**

Mailing Address PO BOX 2995

City

CORDOVA

State

TN

Zip Code

28088

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

C00023028

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

8500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

**Transaction ID : SA11C.5906**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL PRO-LIFE ALLIANCE PAC****C.**Mailing Address 5211 PORT ROYAL ROAD  
SUITE 500

City

SPRINGFIELD

State

VA

Zip Code

22151

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

C00358051

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

**Transaction ID : SA11C.5900**

Amount of Each Receipt this Period

500.00

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

5500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 78

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL RESTAURANT ASSOCIATION PAC**

Mailing Address 2055 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 03 / 2014

**Transaction ID : SA11C.5984**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL SOCIETY OF PROFESSIONAL SURVEYORS, INC. ACSM/NSPS PAC**

Mailing Address 5119 PEGASUS COURT

SUITE Q

City

FREDERICK

State

MD

Zip Code

21704

FEC ID number of contributing  
federal political committee.

**C** C00152892

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 16 / 2014

**Transaction ID : SA11C.5761**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSN/TELECOMMUNICATION EDUCATION COMMITTEE ORG**

Mailing Address 4121 WILSON BOULEVARD

10TH FLOOR

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

**C** C00004473

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 03 / 2014

**Transaction ID : SA11C.6004**

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 78

<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)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NEW PIONEERS PAC**

Mailing Address 228 SOUTH WASHINGTON STREET  
SUITE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C** C00459123

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11C.5903

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)**

Mailing Address 1300 I STREET, NW  
4TH FLOOR

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11C.5949

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC**

Mailing Address 805 15TH STREET, NW  
SUITE 430

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SA11C.6028

Amount of Each Receipt this Period

2000.00

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

7000.00

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

46500.00

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

PAGE 54 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN STATIONERY**

Mailing Address 100 N. PARK AVENUE

City	State	Zip Code
PERU	IN	46970

Purpose of Disbursement  
STATIONERY

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

95.75

Transaction ID : SB17.5824

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5778

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

1.27

Transaction ID : SB17.5779

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

101.22

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

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

PAGE 55 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		17		2014

Amount of Each Disbursement this Period

4.20
------

Transaction ID : SB17.5840

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		17		2014

Amount of Each Disbursement this Period

39.30
-------

Transaction ID : SB17.5841

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		19		2014

Amount of Each Disbursement this Period

2.64
------

Transaction ID : SB17.5839

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

46.14

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

PAGE 56 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

10.05
-------

Transaction ID : SB17.5838

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5834

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2014

Amount of Each Disbursement this Period

4.20
------

Transaction ID : SB17.5835

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

15.27



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

PAGE 57 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2014

Amount of Each Disbursement this Period

2.25
------

Transaction ID : SB17.5836

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2014

Amount of Each Disbursement this Period

2.25
------

Transaction ID : SB17.5837

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

Amount of Each Disbursement this Period

10.05
-------

Transaction ID : SB17.5831

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

14.55

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

PAGE 58 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

Amount of Each Disbursement this Period

2.25
------

Transaction ID : SB17.5832

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

Amount of Each Disbursement this Period

10.05
-------

Transaction ID : SB17.5833

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5828

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

13.32

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

PAGE 59 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

4.20
------

Transaction ID : SB17.5829

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

1.27
------

Transaction ID : SB17.5830

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

1.27
------

Transaction ID : SB17.6017

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

6.74
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

1.08
------

Transaction ID : SB17.5978

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5976

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5977

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

3.12

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

PAGE 61 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5975

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2014

Amount of Each Disbursement this Period

10.05
-------

Transaction ID : SB17.6018

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

19.80
-------

Transaction ID : SB17.5972

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

30.87

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

1.02
------

Transaction ID : SB17.5973

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2014

Amount of Each Disbursement this Period

4.20
------

Transaction ID : SB17.5969

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2014

Amount of Each Disbursement this Period

7.59
------

Transaction ID : SB17.5970

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

12.81

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2014

Amount of Each Disbursement this Period

39.30
-------

Transaction ID : SB17.5971

**B. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2014

Amount of Each Disbursement this Period

101.70
--------

Transaction ID : SB17.5974

**C. ANEDOT**

Mailing Address PO BOX 85431

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement  
CREDIT CARD FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

39.30
-------

Transaction ID : SB17.5993

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

180.30

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

PAGE 64 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CANDIDATE COMMAND, LLC**Mailing Address 1420 NW VIVION  
SUITE 113

City KANSAS CITY State MO Zip Code 64118

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	17	2014

Amount of Each Disbursement this Period

16035.00
----------

**Transaction ID : SB17.5780****B. CANDIDATE COMMAND, LLC**Mailing Address 1420 NW VIVION  
SUITE 113

City KANSAS CITY State MO Zip Code 64118

Purpose of Disbursement  
ADVERTISING-PRINT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	25	2014

Amount of Each Disbursement this Period

18535.00
----------

**Transaction ID : SB17.5848****C. CRICKET**

Mailing Address 5887 COPLEY DRIVE

City SAN DIEGO State CA Zip Code 92111

Purpose of Disbursement  
MOBILE PHONE SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	21	2014

Amount of Each Disbursement this Period

380.50
--------

**Transaction ID : SB17.5827****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

34950.50
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.5981

**B. TYLER J FOOTE**Mailing Address 4668 STILL MEADOW DRIVE  
APARTMENT #112

City	State	Zip Code
WILMINGTON	NC	28412

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

3670.50
---------

Transaction ID : SB17.5980

**C. IMPACT STRATEGIES**

Mailing Address PO BOX 18165

City	State	Zip Code
RALEIGH	NC	27619

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

595.49
--------

Transaction ID : SB17.5983

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

5065.99

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

PAGE 66 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. IMPACT STRATEGIES**

Mailing Address PO BOX 18165

City	State	Zip Code
RALEIGH	NC	27619

Purpose of Disbursement  
REIMBURSEMENT: POSTAGE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

228.70
--------

Transaction ID : SB17.6029

**B. CHAUNCEY E LAMBETH**Mailing Address 824 ST. ANDREW DRIVE  
APARTMENT Q

City	State	Zip Code
WILMINGTON	NC	28412

Purpose of Disbursement  
REIMBURSEMENT: MILEAGE

002

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

1169.35
---------

Transaction ID : SB17.5847

**C. CHAUNCEY E LAMBETH**Mailing Address 824 ST. ANDREW DRIVE  
APARTMENT Q

City	State	Zip Code
WILMINGTON	NC	28412

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

2705.25
---------

Transaction ID : SB17.5979

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

4103.30

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

PAGE 67 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAUNCEY E LAMBETH**Mailing Address 824 ST. ANDREW DRIVE  
APARTMENT QCity State Zip Code  
WILMINGTON NC 28412Purpose of Disbursement  
REIMBURSEMENT: MILEAGE/OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

549.18
--------

Transaction ID : SB17.6030

**B. MAJORITY CONNECTIONS, LLC**

Mailing Address 10 PINNACLE ROAD

City State Zip Code  
DURHAM NC 27705Purpose of Disbursement  
MEDIA CONSULTING/REIMBURSEMENT ADVERTISING-INTERNET

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

3913.97
---------

Transaction ID : SB17.5995

**C. METRO MAILING AND PRINTING**

Mailing Address 109 WINONA STREET

City State Zip Code  
CHARLOTTE NC 28203Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		17		2014

Amount of Each Disbursement this Period

505.30
--------

Transaction ID : SB17.5781

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

4968.45

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

PAGE 68 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NORTH CAROLINA DEPARTMENT OF REVENUE**

Mailing Address 501 N. WILMINGTON STREET

City	State	Zip Code
RALEIGH	NC	27604

Purpose of Disbursement  
TAXES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

530.00
--------

Transaction ID : SB17.6040

**B. O3 STRATEGIES**

Mailing Address PO BOX 25363

City	State	Zip Code
RALEIGH	NC	27611

Purpose of Disbursement  
WEBSITE SERVICES

004

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.5990

**C. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City	State	Zip Code
BOCA RATON	FL	33496

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2014

Amount of Each Disbursement this Period

5.34
------

Transaction ID : SB17.5825

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

585.34



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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE INC.**Mailing Address 705 MELVIN AVENUE  
#105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
AIRFARE/HOTEL/CAR RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

778.00
--------

Transaction ID : SB17.5844

**B. ONMESSAGE INC.**Mailing Address 705 MELVIN AVENUE  
#105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
ADVERTISING-TV

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

30056.00
----------

Transaction ID : SB17.6020

**C. ONMESSAGE INC.**Mailing Address 705 MELVIN AVENUE  
#105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
ADVERTISING-TV

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

16192.00
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Transaction ID : SB17.6042

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

47026.00

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. POLITICO MANAGEMENT SERVICE**

Mailing Address 315 BT ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

City	State	Zip Code
LUMBERTON	NC	28258

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
GOTV

001

**Transaction ID : SB17.5845**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**B. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

City	State	Zip Code
ALEXANDRIA	VA	22314

Amount of Each Disbursement this Period

11500.00
----------

Purpose of Disbursement  
SURVEY

005

**Transaction ID : SB17.5846**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**C. RIVER LANDING**

Mailing Address 111 RIVER VILLAGE PLACE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

City	State	Zip Code
WALLACE	NC	28466

Amount of Each Disbursement this Period

443.87
--------

Purpose of Disbursement  
FOOD/BEVERAGE

007

**Transaction ID : SB17.6023**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

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

12943.87

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

PAGE 72 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELIZABETH R SEIDEL**Mailing Address 4520 STILL MEADOW DRIVE  
UNIT 101

City WILMINGTON State NC Zip Code 28412

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

1939.75
---------

Transaction ID : SB17.6038

**B. ELIZABETH R SEIDEL**Mailing Address 4520 STILL MEADOW DRIVE  
UNIT 101

City WILMINGTON State NC Zip Code 28412

Purpose of Disbursement  
REIMBURSEMENT: MILEAGE/FOOD

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

848.93
--------

Transaction ID : SB17.6024

**C. THE FORD FIRM, PLLC**

Mailing Address PO BOX 701

City CLAYTON State NC Zip Code 27528

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

1987.50
---------

Transaction ID : SB17.5996

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

4776.18



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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POSTAL SERVICE**

Mailing Address 201 NORTH 3RD STREET

City	State	Zip Code
SMITHFIELD	NC	27577

Purpose of Disbursement  
POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2014

Amount of Each Disbursement this Period

5.75
------

Transaction ID : SB17.5822

**B. UNITED STATES POSTAL SERVICE**

Mailing Address 201 NORTH 3RD STREET

City	State	Zip Code
SMITHFIELD	NC	27577

Purpose of Disbursement  
POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.6019

**C. UNITED STATES POSTAL SERVICE**

Mailing Address 201 NORTH 3RD STREET

City	State	Zip Code
SMITHFIELD	NC	27577

Purpose of Disbursement  
POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2014

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.5968

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

103.75

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

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US DEPARTMENT OF THE TREASURY**

Mailing Address 1500 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20220

Purpose of Disbursement  
TAXES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

2996.00

Transaction ID : SB17.6039

**B. SARAH WATERS**

Mailing Address 1711 CENTER ROAD

City	State	Zip Code
RALEIGH	NC	27608

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.5982

**C. BARRY WOODARD**

Mailing Address 208 UWHARRIE COURT

City	State	Zip Code
GARNER	NC	27529

Purpose of Disbursement  
IN-KIND: FOOD/BEVERAGE/RENTAL/ENTERTAINMENTCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2014

Amount of Each Disbursement this Period

1454.77

Transaction ID : SB17.5956

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

7450.77

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

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

PAGE 75 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WTSB 1090**

Mailing Address PO BOX 90

City	State	Zip Code
SMITHFIELD	NC	27577

Purpose of Disbursement  
ADVERTISING-RADIO

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		17		2014

Amount of Each Disbursement this Period

2250.00
---------

Transaction ID : SB17.5783

**B. DAVID ROUZER**

Mailing Address 108 PEACH ORCHARD DRIVE

City	State	Zip Code
BENSON	NC	27504

Purpose of Disbursement

002

Category/  
Type

Candidate Name

**DAVID ROUZER**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: NC

District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

969.92
--------

Transaction ID : SB17.5987

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

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

3219.92

173473.64

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

PAGE 76 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DAVID ROUZER**

Mailing Address 108 PEACH ORCHARD DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

City	State	Zip Code
BENSON	NC	27504

Amount of Each Disbursement this Period

5532.24
---------

Purpose of Disbursement  
REFUND OF 9/30/2014 CONTRIBUTION SEE SCHEDULE A LINE 11(D)

010

Transaction ID : SB20A.5997

Candidate Name

**DAVID ROUZER**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: NC

District: 07

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

5532.24

5532.24

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

PAGE 77 OF 78

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

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NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MCSALLY FOR CONGRESS**

Mailing Address PO BOX 19128

City	State	Zip Code
TUSCON	AZ	85731

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**MARTHA MCSALLY**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) RECOUNT

State: AZ District: 02

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		11		2014

Amount of Each Disbursement this Period

1029.69
---------

Transaction ID : SB21.6026

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

1029.69

1029.69

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 78 OF 78

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DAVID ROUZER FOR CONGRESS**

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

**DAVID ROUZER**

Nature of Debt (Purpose):

**MILEAGE**

Mailing Address 108 PEACH ORCHARD DRIVE

City State

Zip Code

**BENSON****NC****27504**

Outstanding Balance Beginning This Period

**969.92****Transaction ID : SD10.29**

Amount Incurred This Period

**0.00**

Payment This Period

**969.92**

Outstanding Balance at Close of This Period

**0.00**

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶**0.00**2) **TOTALS** This Period (last page this line number only) ..... ▶**0.00**3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶