

# 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  
**COMMITTEE TO ELECT JEFF PHILLIPS**

ADDRESS (number and street) 5109 W WENDOVER AVE  
 Check if different than previously reported. (ACC) JAMESTOWN NC 27282

2. **FEC IDENTIFICATION NUMBER** ▼ C C00556571 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
NC 06

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 04 / 17 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Mr. William Stevens  
Signature of Treasurer Mr. William Stevens *[Electronically Filed]* Date M M / D D / Y Y Y Y 07 / 08 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**COMMITTEE TO ELECT JEFF PHILLIPS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	4715.00	35985.05
(b) Total Contribution Refunds (from Line 20(d)) .....	25.00	25.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4690.00	35960.05
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	58183.72	113099.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	1094.27	1094.27
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	57089.45	112005.42
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	4.63	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	77790.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**COMMITTEE TO ELECT JEFF PHILLIPS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3375.00	29485.05
(ii) Unitemized.....	1340.00	6500.00
(iii) TOTAL of contributions from individuals ▶	4715.00	35985.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4715.00	35985.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	6050.00	76050.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	6050.00	76050.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	1094.27	1094.27
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	11859.27	113129.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	58183.72	113099.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	25.00	25.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	25.00	25.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	58208.72	113124.69

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46354.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11859.27
25. SUBTOTAL (add Line 23 and Line 24).....	58213.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58208.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4.63

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

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

NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

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

Mailing Address 2802 Lake Forest Drive

City Greensboro State NC Zip Code 27408

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

Name of Employer Jerry Clark, Orthodontist Occupation Orthodontist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : SA11AI.4446**

Amount of Each Receipt this Period  
 1000.00  
 donation

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

Mailing Address 31 Cedar Cove Road

City Pelham State NC Zip Code 27311

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

Name of Employer Patrick Henry Community Col. Occupation Math Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.4549**

Amount of Each Receipt this Period  
 75.00  
 In-kind - ad place in Caswell Messenger

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Larry H. Holmquist**

Mailing Address 4902 Towne Ridge Drive

City Greensboro State NC Zip Code 27455

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11AI.4547**

Amount of Each Receipt this Period  
 475.00  
 In-kind - food and beverages and rent for meet and greet

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<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	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

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

Mailing Address 8 Brighton Place

City Greensboro State NC Zip Code 27410

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

Name of Employer T. Cooper James & Associates Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.4473**

Amount of Each Receipt this Period  
500.00  
donation

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

Mailing Address 5704 Snow Hill Drive

City Summerfield State NC Zip Code 27358

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

Name of Employer Novartis Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11AI.4444**

Amount of Each Receipt this Period  
250.00  
donation

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

Mailing Address 4821 Fox Chase Rd

City Greensboro State NC Zip Code 27410

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

Name of Employer Brad Smith Investment Group Occupation Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : SA11AI.4553**

Amount of Each Receipt this Period  
825.00  
In-kind - catered food campaign event in April reported on this date

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

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

1575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Michael L. Tingen**

Mailing Address 3106 Horse Pen Creek Road

City Greensboro State NC Zip Code 27410

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

Name of Employer Dominos Pizza Franchise Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11Al.4465**

Amount of Each Receipt this Period  
 250.00  
 donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

3375.00

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

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

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Phillips**

Mailing Address 6108 Mountain Brook Rd

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C H0NC06175**

Name of Employer Phillips Wealth Management Occupation Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**76050.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA13A.4573**

Amount of Each Receipt this Period  
**6050.00**  
 loan from candidate

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**6050.00**

**6050.00**



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

**A.** Full Name (Last, First, Middle Initial)  
**Intermarkets, Inc.**

Mailing Address 11911 Freedom Drive  
Suite 1140

City Reston State VA Zip Code 20190

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1094.27

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA14.4536**

Amount of Each Receipt this Period  
1094.27  
refund on phone number not reached in campaign

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1094.27

1094.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. A Bolder Image</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 205 Aloe Road		Amount of Each Disbursement this Period 1305.77 <b>Transaction ID : SB17.4514</b>
City Greensboro State NC Zip Code 27409	Purpose of Disbursement Palm Card Printing	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. A Bolder Image</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 205 Aloe Road		Amount of Each Disbursement this Period 1305.77 <b>Transaction ID : SB17.4570</b>
City Greensboro State NC Zip Code 27409	Purpose of Disbursement printing of palm cards	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Aneidot.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 5555 Hilton Ave, Suite 105		Amount of Each Disbursement this Period 8.10 <b>Transaction ID : SB17.4452</b>
City Baton Rouge State LA Zip Code 70808	Purpose of Disbursement credit card fee	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2619.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Anedot.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 5555 Hilton Ave, Suite 105		Amount of Each Disbursement this Period 4.20 <b>Transaction ID : SB17.4453</b>
City Baton Rouge	State LA	
Purpose of Disbursement credit card processing fee		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

Full Name (Last, First, Middle Initial) <b>B. Anedot.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 5555 Hilton Ave, Suite 105		Amount of Each Disbursement this Period 10.05 <b>Transaction ID : SB17.4454</b>
City Baton Rouge	State LA	
Purpose of Disbursement credit card fee		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

Full Name (Last, First, Middle Initial) <b>c. Anedot.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 5555 Hilton Ave, Suite 105		Amount of Each Disbursement this Period 39.30 <b>Transaction ID : SB17.4455</b>
City Baton Rouge	State LA	
Purpose of Disbursement credit card processing fee		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	53.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Anomaly Squared, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 2 Centerview Drive Suite 200		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.4568</b>
City Greensboro State NC Zip Code 27407	Purpose of Disbursement web page production and management	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. Anomaly Squared, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 2 Centerview Drive Suite 200		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.4574</b>
City Greensboro State NC Zip Code 27407	Purpose of Disbursement web site development and mgmt	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Bravo Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1001 Battleground Ave.		Amount of Each Disbursement this Period 1014.77 <b>Transaction ID : SB17.4477</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Banner Sign for Billboard	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11014.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Trevor Brock</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1264 Westover Terrace		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4529</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Video editing and production	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. Greensboro Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 410 Sunset Drive		Amount of Each Disbursement this Period 1081.21 <b>Transaction ID : SB17.4557</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement fundraiser room and refreshments	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Mrs. Tiffanee Grindle</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 1915 San Fernando Drive		Amount of Each Disbursement this Period 392.00 <b>Transaction ID : SB17.4571</b>
City High Point State NC Zip Code 27265	Purpose of Disbursement postage for absentee voter reminders	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1973.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Tiffanee Grindle</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 1915 San Fernando Drive		Amount of Each Disbursement this Period 3,000.00 <b>Transaction ID : SB17.4572</b>
City High Point	State NC Zip Code 27265	
Purpose of Disbursement poll work		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Cindy Holmquist</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4902 Towne Ridge Drive		Amount of Each Disbursement this Period 365.60 <b>Transaction ID : SB17.4527</b>
City Greensboro	State NC Zip Code 27455	
Purpose of Disbursement Election night party expense reimbursement		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

Full Name (Last, First, Middle Initial) <b>c. Mr. Larry H. Holmquist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 4902 Towne Ridge Drive		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4483</b>
City Greensboro	State NC Zip Code 27455	
Purpose of Disbursement Volunteer recruitment and scheduling		Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3490.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry H. Holmquist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 4902 Towne Ridge Drive		Amount of Each Disbursement this Period 475.00 <b>Transaction ID : SB17.4548</b>
City Greensboro State NC Zip Code 27455	Purpose of Disbursement In-kind - food and beverages and rent for meet and greet	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Larry H. Holmquist</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4902 Towne Ridge Drive		Amount of Each Disbursement this Period 3688.20 <b>Transaction ID : SB17.4528</b>
City Greensboro State NC Zip Code 27455	Purpose of Disbursement Final volunteer recruitment and scheduling and expenses	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Intermarkets, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 11911 Freedom Drive Suite 1140		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.4506</b>
City Reston State VA Zip Code 20190	Purpose of Disbursement deposit for web adv.	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7663.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Shirley Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 3015 Dellwood Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4475</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement telemarketing to locate yard signs	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. Shirley Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 3015 Dellwood Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4504</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Telemarketing to locate yard signs	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. Shirley Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 3015 Dellwood Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4526</b>
City Greensboro State NC Zip Code 27408	Purpose of Disbursement Final campaign calls and site promotions	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Brad Smith</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 4821 Fox Chase Rd		Amount of Each Disbursement this Period 825.00 <b>Transaction ID : SB17.4555</b>
City Greensboro	State NC	
Zip Code 27410	Purpose of Disbursement In-kind - catered food campaign event in April reported on this date	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Townsend Enterprises LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 6506 Peppermill Dr.		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4522</b>
City Oak Ridge	State NC	
Zip Code 27310	Purpose of Disbursement Voter research and campaign strategy analysis	Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

Full Name (Last, First, Middle Initial) <b>c. Townsend Enterprises LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 6506 Peppermill Dr.		Amount of Each Disbursement this Period 2895.51 <b>Transaction ID : SB17.4539</b>
City Oak Ridge	State NC	
Zip Code 27310	Purpose of Disbursement Voter research, campaign polling place mgmt	Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6720.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. US Press</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1628 James P. Rogers Drive		Amount of Each Disbursement this Period 3214.00 <b>Transaction ID : SB17.4480</b>
City Valosta State GA Zip Code 31601	Purpose of Disbursement Printing and processing of 3rd postcard mailingjg	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>B. US Press</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1628 James P. Rogers Drive		Amount of Each Disbursement this Period 4014.00 <b>Transaction ID : SB17.4489</b>
City Valosta State GA Zip Code 31601	Purpose of Disbursement Printing and processing of 4th mailer	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

Full Name (Last, First, Middle Initial) <b>c. USPS Valdosta, GA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 401 N Patterson St Fl 1		Amount of Each Disbursement this Period 8414.31 <b>Transaction ID : SB17.4488</b>
City Valdosta State GA Zip Code 31601	Purpose of Disbursement Certified check for 4th mailing postage	
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15642.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT JEFF PHILLIPS**

Full Name (Last, First, Middle Initial) <b>A. Voice Broadcasting Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1527 S. Cooper Street		Amount of Each Disbursement this Period 1466.19 <b>Transaction ID : SB17.4524</b>
City Arlington	State TX	
Zip Code 76013	Purpose of Disbursement robo calls	Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 06	

Full Name (Last, First, Middle Initial) <b>B. Wear Yours</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 342 Tate Street		Amount of Each Disbursement this Period 496.39 <b>Transaction ID : SB17.4494</b>
City Greensboro	State NC	
Zip Code 27403	Purpose of Disbursement Campaign t-shirts	Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 06	

Full Name (Last, First, Middle Initial) <b>c. West 65, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address P.O. Box 39436		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.4520</b>
City Greensboro	State NC	
Zip Code 27438	Purpose of Disbursement Prepare Print and mail campaign promotions	Category/ Type
Candidate Name <b>COMMITTEE TO ELECT JEFF PHILLIPS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5962.58
<b>TOTAL</b> This Period (last page this line number only).....	56440.37

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4105

**COMMITTEE TO ELECT JEFF PHILLIPS**

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

**[PERSONAL FUNDS]**

Election: 2014

Jeff Phillips

Primary  
 General  
 Other (specify) ▼

Mailing Address

6108 Mountain Brook Rd

City

State

ZIP Code

Greensboro

NC

27455

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02

05

2014

none

0.00

% (apr)

Yes  No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

5000.00

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

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

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

NAME OF COMMITTEE (In Full) **COMMITTEE TO ELECT JEFF PHILLIPS** Transaction ID : **SC/10.4101**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Jeff Phillips</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 6108 Mountain Brook Rd		

City	State	ZIP Code
Greensboro	NC	27455

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
65000.00	0.00	65000.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2014 Y	M M / D D / Y none Y Y			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	65000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

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

NAME OF COMMITTEE (In Full) **COMMITTEE TO ELECT JEFF PHILLIPS** Transaction ID : **SC/10.4573**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Jeff Phillips</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 6108 Mountain Brook Rd		

City	State	ZIP Code
Greensboro	NC	27455

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6050.00	0.00	6050.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 06 / 30 / 2014	M M / D D / Y Y Y Y none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	6050.00
<b>TOTALS</b> This Period (last page in this line only).....	76050.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**COMMITTEE TO ELECT JEFF PHILLIPS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeff Phillips</b>		Nature of Debt (Purpose): filing fee
Mailing Address 6108 Mountain Brook Rd		
City State Zip Code Greensboro NC 27455		

Outstanding Balance Beginning This Period		Transaction ID : SD10.4349	
1740.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1740.00	

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	1740.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	1740.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	76050.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		77790.00