



**SUMMARY PAGE**  
of Receipts and Disbursements

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

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	58895.61	130727.88
(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)).....	58870.61	130702.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	141355.32	184203.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	141355.32	184203.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	196499.49	
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).....	253199.75	

**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

**Meadows for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37860.15	102360.15
(ii) Unitemized.....	9419.28	11146.41
(iii) TOTAL of contributions from individuals ▶	47279.43	113506.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5200.00	9200.00
(d) The Candidate.....	6416.18	8021.32
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	58895.61	130727.88
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	58895.61	380727.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	141355.32	184203.39
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) ►	141380.32	184228.39

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	278984.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58895.61
25. SUBTOTAL (add Line 23 and Line 24).....	337879.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141380.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	196499.49

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 5057 Lighthouse Court

City Morganton State NC Zip Code 28655

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

Name of Employer Baber Turnaround Consulting Occupation Economic Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2012

**Transaction ID : SA11AI.4698**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address P.O. Box 1976

City Cashiers State NC Zip Code 28717

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

Name of Employer N/A Occupation Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.4577**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 15 Frith Drive

City Asheville State NC Zip Code 28803

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

Name of Employer The Bell Co., Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5223**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2850.00**

**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 6 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Bobby Bennett**

Mailing Address 115 Poplar Loop Drive

City State Zip Code  
Flat Rock NC 28731

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 23 / 2012

**Transaction ID : SA11AI.5119**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 1475

City State Zip Code  
Maggie Valley NC 28751

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

Name of Employer Occupation  
Elk Country Realty, Inc. Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : SA11AI.5206**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 119 Smith Road

City State Zip Code  
Spruce Pine NC 28777

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 12 / 2012

**Transaction ID : SA11AI.5010**

Amount of Each Receipt this Period  
300.00

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

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

1050.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Joan H. Brendle**

Mailing Address 135 Bent Tree Drive, H-3

City State Zip Code  
Laurel Park NC 28739

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

Name of Employer Occupation  
Self-Employed Interior Designer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2012

**Transaction ID : SA11AI.4800**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. Box 500

City State Zip Code  
Lenoir NC 28645

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

Name of Employer Occupation  
Broyhill Asset Management CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11AI.4919**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 500

City State Zip Code  
Lenoir NC 28645

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

Name of Employer Occupation  
Broyhill Realty CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11AI.4917**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Grady G. Byrd Jr.**

Mailing Address 341 Vanderbilt Road

City Asheville State NC Zip Code 28803

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5258**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**N.E. Cannady III**

Mailing Address 60 Deerhaven Lane

City Asheville State NC Zip Code 28803

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

Name of Employer MB Haynes Corporation Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5265**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Nathaniel E. Cannady Jr.**

Mailing Address 35 Woodbury Road

City Asheville State NC Zip Code 28804

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

Name of Employer MB Haynes Corporation Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5266**

Amount of Each Receipt this Period  
400.00

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

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

1050.00



**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1440 Casa Rio Drive

City Orlando State FL Zip Code 32825

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : SA11AI.4886**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address P.O. Box 1605

City Cashiers State NC Zip Code 28717

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

Name of Employer Carlton Companies Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : SA11AI.5184**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2848 Icard Rhodhiss Road

City Connelly Springs State NC Zip Code 28612

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

Name of Employer Granny's Country Kitchen Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : SA11AI.5330**

Amount of Each Receipt this Period  
 225.00

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

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

1725.00

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

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

FOR LINE NUMBER: PAGE 10 OF 95  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 3290 Laurel Park Hwy

City Hendersonville State NC Zip Code 28739

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.4579**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 3290 Laurel Park Hwy

City Hendersonville State NC Zip Code 28739

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5260**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 102 Moss Ridge Court

City Flat Rock State NC Zip Code 28731

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : SA11AI.4731**

Amount of Each Receipt this Period  
 300.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Beverly M. Dillon**

Mailing Address 201 Shady Laurel Court

City Hendersonville State NC Zip Code 28739

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11AI.4882**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**John F. Egolf Jr.**

Mailing Address 38 Mountain Lake Drive

City Hendersonville State NC Zip Code 28739

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

Name of Employer President Occupation Egolf Motors, Inc.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : SA11AI.4686**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**William F. Gold Jr.**

Mailing Address 67 Oak Gate Drive

City Hendersonville State NC Zip Code 28739

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

Name of Employer UBS Financial Services Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2012

**Transaction ID : SA11AI.4965**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 95  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**William F. Gold Jr.**

Mailing Address 67 Oak Gate Drive

City Hendersonville State NC Zip Code 28739

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

Name of Employer UBS Financial Services Occupation Vice President

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : SA11AI.5109**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 8150 La Jolla Shores Drive

City La Jolla State CA Zip Code 92037

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : SA11AI.4566**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. Box 1765

City Flat Rock State NC Zip Code 28731

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

Name of Employer Self-Employed Occupation Oral Surgeon

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : SA11AI.4737**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 143 Poplar Loop

City State Zip Code  
Flat Rock NC 28731

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 14 / 2012

**Transaction ID : SA11AI.4684**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 15 Cedar Hill Drive

City State Zip Code  
Asheville NC 28803

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11AI.4936**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3690 Miller Bridge Road

City State Zip Code  
Connellys Springs NC 28612

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 16 / 2012

**Transaction ID : SA11AI.4723**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 95  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 144 Marlborough Road

City Asheville State NC Zip Code 28804

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5278**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P.O. Box 1277

City Zebulon State GA Zip Code 30295

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2012

**Transaction ID : SA11AI.4568**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 109 Rugby Hollow Drive

City Hendersonville State NC Zip Code 28791

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

Name of Employer Principal Engineer Occupation William G. Lapsley & Associates, PA

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Samuel E. Leder**

Mailing Address 4755 Technology Way, Ste 203

City Boca Raton	State FL	Zip Code 33431-3338
--------------------	-------------	------------------------

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

Name of Employer Leder Group	Occupation Chairman
---------------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 05 / 2012

**Transaction ID : SA11AI.4944**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 1085 Green Cove

City Brasstown	State NC	Zip Code 28902
-------------------	-------------	-------------------

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

Name of Employer Valwood	Occupation Procurement
-----------------------------	---------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : SA11AI.5144**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 773

City Highlands	State NC	Zip Code 28741
-------------------	-------------	-------------------

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

Name of Employer Lupoli Construction	Occupation Owner
---	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 29 / 2012

**Transaction ID : SA11AI.4619**

Amount of Each Receipt this Period  
2000.00

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

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

2900.00

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

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

FOR LINE NUMBER: PAGE 16 OF 95  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 1000 McFarlane Way

City Hendersonville State NC Zip Code 28739

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2012

**Transaction ID : SA11AI.4812**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address P.O. Box 40

City Sapphire State NC Zip Code 28774

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

Name of Employer McNeely Trucking Occupation Owner

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 09 / 2012

**Transaction ID : SA11AI.4668**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 19 Hemlock Road

City Asheville State NC Zip Code 28803

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

Name of Employer Preferred Properties-Asheville Occupation Real Estate Agent

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2012

**Transaction ID : SA11AI.5103**

Amount of Each Receipt this Period  
 250.00

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dorothy McPherson**

Mailing Address 1110 W. Ivanhoe Blvd, Unit 15

City Orlando	State FL	Zip Code 32804
-----------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : SA11AI.5186**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 508 Hagen Drive

City Hendersonville	State NC	Zip Code 28739
------------------------	-------------	-------------------

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

Name of Employer Fibre Marketing Group, LLC	Occupation Human Resources Manager
--	---------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2012

**Transaction ID : SA11AI.4798**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 315 Ethan Pond Way

City Hendersonville	State NC	Zip Code 28791
------------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Construction
-----------------------------------	----------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5288**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**James F. Miller IV**

Mailing Address 21 Camp Greystone Lane

City State Zip Code  
Zirconia NC 28790

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

Name of Employer Occupation  
Camp Greystone Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2012

**Transaction ID : SA11AI.4765**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 117 White Ash Drive E

City State Zip Code  
Asheville NC 28803

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

Name of Employer Occupation  
Van Winkle Law Firm Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5280**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 16714 NE 10th Street

City State Zip Code  
Gainesville FL 32609

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

Name of Employer Occupation  
University of Florida Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 09 / 2012

**Transaction ID : SA11AI.5012**

Amount of Each Receipt this Period  
750.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address P.O. Box 2429

City State Zip Code  
Cashiers NC 28717

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

Name of Employer Occupation  
Pro Management NC, LLC Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : SA11AI.5082**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 1757

City State Zip Code  
Robbinsville NC 28771

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

Name of Employer Occupation  
Odom Trucking Company, Inc. Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 23 / 2012

**Transaction ID : SA11AI.4836**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 7 Greenwood Road

City State Zip Code  
Asheville NC 28803

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 23 / 2012

**Transaction ID : SA11AI.5123**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Charles D. Owen Jr.**

Mailing Address 7 Greenwood Road

City Asheville State NC Zip Code 28803

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 23 / 2012

**Transaction ID : SA11AI.5121**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2364 Glenheath Drive

City Hendersonville State NC Zip Code 28791

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

Name of Employer CAD Design, Inc. Occupation Printed Circuit Board Layout/Design

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 19 / 2012

**Transaction ID : SA11AI.4796**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 2364 Glenheath Drive

City Hendersonville State NC Zip Code 28791

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

Name of Employer CAD Design, Inc. Occupation Printed Circuit Board Layout/Design

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2012

**Transaction ID : SA11AI.5086**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 2500 Rivers Road, NW

City Atlanta State GA Zip Code 30305

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

Name of Employer **KPMG** Occupation **Accountant**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2012**

**Transaction ID : SA11AI.4570**

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

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

Mailing Address 500 JJ Guffey Road

City Rutherfordton State NC Zip Code 28139

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 24 / 2012**

**Transaction ID : SA11AI.4888**

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

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Gregory W. Salyer**

Mailing Address 172 Lily Lane

City Whittier State NC Zip Code 28789

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

Name of Employer **Salyer Hearing Center** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 22 / 2012**

**Transaction ID : SA11AI.5112**

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

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

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

\_\_\_\_\_

**1500.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1437 Shortoff Road

City Highlands State NC Zip Code 28741

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2012

**Transaction ID : SA11AI.4623**

Amount of Each Receipt this Period  
 700.00

Amount of Each Receipt this Period  
 2200.00

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

Mailing Address 1716 Grande Park Drive

City Englewood State FL Zip Code 34223

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2012

**Transaction ID : SA11AI.4638**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Irwin W Stolz III**

Mailing Address 7 S. Main Street

City Alpharetta State GA Zip Code 30009

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

Name of Employer Self-Employed Occupation Real Estate Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2012

**Transaction ID : SA11AI.4670**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

**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	FOR LINE NUMBER: (check only one)	PAGE 23 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**J.G. Gordon Strayhorn**

Mailing Address 500 Illahee Road

City Brevard State NC Zip Code 28712

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

Name of Employer Heavenly World Holdings, LLC Occupation Managing Member

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2012

**Transaction ID : SA11AI.5089**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harold Jack Summey Jr.**

Mailing Address 925 Greenville Hwy

City Hendersonville State NC Zip Code 28792

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

Name of Employer Self-Employed Occupation Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5286**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P.O. Box 16648

City Asheville State NC Zip Code 28816

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

Name of Employer Self-Employed Occupation Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5225**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Lora Thrash**

Mailing Address 94 Gaston Mountain Road

City Asheville State NC Zip Code 28806

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.5256**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address P.O. Box 629

City Hendersonville State NC Zip Code 28793

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

Name of Employer J.H. Reaben Oil & Supply Co. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2012

**Transaction ID : SA11AI.5091**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address P.O. Box 629

City Hendersonville State NC Zip Code 28793

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

Name of Employer J.H. Reaben Oil & Supply Co. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : SA11AI.5195**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Phillip D. Walker**

Mailing Address 451 43rd Avenue, NW

City Hickory	State NC	Zip Code 28601
-----------------	-------------	-------------------

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

Name of Employer BB&T	Occupation Banker
--------------------------	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012

**Transaction ID : SA11AI.4761**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 225 Amblewood Trail

City Hendersonville	State NC	Zip Code 28739
------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 225 Amblewood Trail

City Hendersonville	State NC	Zip Code 28739
------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : SA11AI.5095**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address P.O. Box 2692

City: Highlands State: NC Zip Code: 28741

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

Name of Employer: Trillium Links & Village Occupation: President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 30 / 2012

**Transaction ID : SA11AI.5188**

Amount of Each Receipt this Period: 250.00

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

Mailing Address P.O. Box 2692

City: Highlands State: NC Zip Code: 28741

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

Name of Employer: Gilliam's Promise, Inc. Occupation: Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 579.78

Date of Receipt: 01 / 17 / 2012

**Transaction ID : SA11AI.4858**

Amount of Each Receipt this Period: 35.15

In-kind - Fuel

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

Mailing Address 20 Country Club Trail

City: Asheville State: NC Zip Code: 28804

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

Name of Employer: Blossom Gas Occupation: Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 28 / 2012

**Transaction ID : SA11AI.5276**

Amount of Each Receipt this Period: 500.00

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

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

785.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Benny L. Yount**

Mailing Address P.O. Box 3447

City State Zip Code  
Hickory NC 28603

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

Name of Employer Occupation  
Paramount KIA Auto Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11Al.4880**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

37860.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 95
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Edgar Starnes Campaign**

Mailing Address 6715 Lakeview Terrace

City State Zip Code  
Hickory NC 28601-9489

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2012

**Transaction ID : SA11C.4923**

Amount of Each Receipt this Period  
200.00

Non-federal campaign committee - Federally Permissible Source

**B.** Full Name (Last, First, Middle Initial)  
**FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE**

Mailing Address 801 G STREET NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00452383

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : SA11C.4692**

Amount of Each Receipt this Period  
5000.00

**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).....

5200.00

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**252005.14**

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

**Transaction ID : SA11D.4662**

Amount of Each Receipt this Period  
**400.00**

In-kind - Office Rent

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**252305.64**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 02 / 2012**

**Transaction ID : SA11D.5178**

Amount of Each Receipt this Period  
**300.50**

In-kind - Acorns - Gifts for campaign workers

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**252636.89**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2012**

**Transaction ID : SA11D.5174**

Amount of Each Receipt this Period  
**331.25**

In-kind - Rhodes - Christmas Dinner for campaign staff/volunteers

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

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

**1031.75**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**252735.56**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 31 2012**

**Transaction ID : SA11D.5154**

Amount of Each Receipt this Period  
**98.67**

In-kind - Meals; Office Supplies

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**253135.56**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 01 2012**

**Transaction ID : SA11D.4664**

Amount of Each Receipt this Period  
**400.00**

In-kind - Office Rent

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**253331.67**

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

**Transaction ID : SA11D.5172**

Amount of Each Receipt this Period  
**196.11**

In-kind - Fuel; Lunches

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

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

**694.78**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **253449.03**

Date of Receipt: **02 / 08 / 2012**

**Transaction ID : SA11D.5176**

Amount of Each Receipt this Period: **117.36**

In-kind - Gifts for campaign workers

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

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **253737.19**

Date of Receipt: **02 / 09 / 2012**

**Transaction ID : SA11D.5164**

Amount of Each Receipt this Period: **288.16**

In-kind - Bed, Bath & Beyond - bedding for door-to-door volunteers

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

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **254910.12**

Date of Receipt: **02 / 13 / 2012**

**Transaction ID : SA11D.5160**

Amount of Each Receipt this Period: **1172.93**

In-kind - Bed, Bath & Beyond- bedding for door-to-door volunteers

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

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

**1578.45**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands    State: NC    Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.    Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **255214.35**

Date of Receipt: **02 / 20 / 2012**

**Transaction ID : SA11D.5156**

Amount of Each Receipt this Period: **304.23**

In-kind - Office Supplies

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

Mailing Address P.O. Box 811

City: Highlands    State: NC    Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.    Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **255840.51**

Date of Receipt: **02 / 20 / 2012**

**Transaction ID : SA11D.5158**

Amount of Each Receipt this Period: **626.16**

In-kind - Ingles - Meals for door-to-door volunteers

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

Mailing Address P.O. Box 811

City: Highlands    State: NC    Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.    Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **256240.51**

Date of Receipt: **03 / 01 / 2012**

**Transaction ID : SA11D.4949**

Amount of Each Receipt this Period: **400.00**

In-kind - Office Rent

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

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

**1330.39**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**256424.79**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 05 2012**

**Transaction ID : SA11D.5148**

Amount of Each Receipt this Period  
**184.28**

In-kind - Meals; Fuel

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**256622.23**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 05 2012**

**Transaction ID : SA11D.5150**

Amount of Each Receipt this Period  
**197.44**

In-kind - Meals; Fuel

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**256984.08**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 07 2012**

**Transaction ID : SA11D.5170**

Amount of Each Receipt this Period  
**361.85**

In-kind - Ingles - food for door-to-door volunteers

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

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

**743.57**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **257133.03**

Date of Receipt: **03 / 12 / 2012**

**Transaction ID : SA11D.5162**

Amount of Each Receipt this Period: **148.95**

In-kind - Ingles - food for door-to-door volunteers

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

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **257273.03**

Date of Receipt: **03 / 12 / 2012**

**Transaction ID : SA11D.5166**

Amount of Each Receipt this Period: **140.00**

In-kind - Gifts for door-to-door volunteers

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

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **257472.26**

Date of Receipt: **03 / 12 / 2012**

**Transaction ID : SA11D.5168**

Amount of Each Receipt this Period: **199.23**

In-kind - Fuel; Food for door-to-door volunteers

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

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

**488.18**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 95
	<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)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**257662.07**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2012**

**Transaction ID : SA11D.5152**

Amount of Each Receipt this Period  
**189.81**

In-kind - Meals, Parking, Office Supplies

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

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**258021.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2012**

**Transaction ID : SA11D.5302**

Amount of Each Receipt this Period  
**359.25**

In-kind - Travel - Hilton Asheville Biltmore Park

**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).....

**549.06**

**6416.18**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 306.39 <b>Transaction ID : SB17.4540</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Reimbursement - Food and Equipment for Office Opening - no itemization 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 1335.00 <b>Transaction ID : SB17.4616</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Compensation - Campaign work 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 881.15 <b>Transaction ID : SB17.4699</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Reimbursement for Office Equipment/Supplies 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2522.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Sam's Club</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2012
Mailing Address 300 Highlands Square Drive		Amount of Each Disbursement this Period 12.00
City Hendersonville State NC Zip Code 28792	Purpose of Disbursement Office Supplies	
Candidate Name Meadows for Congress		Transaction ID : SB17.4699.0 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Ecycleus</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2012
Mailing Address 101 S. Lexington Avenue		Amount of Each Disbursement this Period 277.55
City Asheville State NC Zip Code 28801	Purpose of Disbursement Computer Monitors	
Candidate Name Meadows for Congress		Transaction ID : SB17.4699.1 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2012
Mailing Address 150 Highlands Square Drive		Amount of Each Disbursement this Period 148.00
City Hendersonville State NC Zip Code 28792	Purpose of Disbursement Office Supplies	
Candidate Name Meadows for Congress		Transaction ID : SB17.4699.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Best Buy</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2012
Mailing Address 10 McKenna Road		Amount of Each Disbursement this Period 443.60
City Arden	State NC	
Zip Code 28704	Purpose of Disbursement Computer	Transaction ID : SB17.4699.3
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 1380.00
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Compensation - Campaign work	Transaction ID : SB17.4708
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 160.00
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Reimbursement for Relettering Sign	Transaction ID : SB17.4791
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1540.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 1260.00 <b>Transaction ID : SB17.4942</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Compensation - Campaign Work Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 21.34 <b>Transaction ID : SB17.4989</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Reimbursement - Office Supplies Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Tyler Tate Apodaca</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 294.31 <b>Transaction ID : SB17.5059</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Reimbursement - Fuel, Copies, Signs Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1575.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Lowe's</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 1415 7th Avenue East		Amount of Each Disbursement this Period 15.80
City Hendersonville State NC Zip Code 28792	Purpose of Disbursement Zip ties for signs 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.5059.0 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Copy Works Hendersonville</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 348 7th Avenue East		Amount of Each Disbursement this Period 208.17
City Hendersonville State NC Zip Code 28792	Purpose of Disbursement Marketing - Copies of Flyers 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.5059.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Tyler Tate Apodaca</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012
Mailing Address 1508 5th Avenue West		Amount of Each Disbursement this Period 1447.50
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Compensation - campaign work 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.5081
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1447.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Asheville QuickPrint</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 100 whitson Avenue		Amount of Each Disbursement this Period 2222,222.22 1350.39 <b>Transaction ID : SB17.4873</b>
City Swannonoa State NC Zip Code 28778	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 2222,222.22 554.18 <b>Transaction ID : SB17.4912</b>
City Atlanta State GA Zip Code 30348-5262	Purpose of Disbursement Telephone/Internet Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. BCGOP</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address P.O. Box 9834		Amount of Each Disbursement this Period 2222,222.22 300.00 <b>Transaction ID : SB17.4988</b>
City Asheville State NC Zip Code 28815	Purpose of Disbursement Lincoln-Reagan Dinner Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2204.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Blue Ridge Christian News</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 29 Crystal Street Suite 101		Amount of Each Disbursement this Period 1660.00 <b>Transaction ID : SB17.4896</b>
City Spruce Pine State NC Zip Code 28777	Purpose of Disbursement Advertising - Newspaper Category/Type 004	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Capital One Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2012
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 14902.98 <b>Transaction ID : SB17.4820</b>
City Charlotte State NC Zip Code 28272-1083	Purpose of Disbursement Credit Card Transactions Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Asheville QuickPrint</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2012
Mailing Address 100 whitson Avenue		Amount of Each Disbursement this Period 475.08 <b>Transaction ID : SB17.4820.0</b> <b>[MEMO ITEM]</b>
City Swannonoa State NC Zip Code 28778	Purpose of Disbursement Office Supplies - Envelopes Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16562.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Asheville QuickPrint</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 100 whitson Avenue		Amount of Each Disbursement this Period 114.22
City Swannonoa State NC Zip Code 28778	Purpose of Disbursement Banner	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4820.1 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

Full Name (Last, First, Middle Initial) <b>B. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 2756.23
City Cashiers State NC Zip Code 28717	Purpose of Disbursement Printing - Letterhead, Envelopes, Business Cards	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4820.3 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

Full Name (Last, First, Middle Initial) <b>c. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 98.21
City Cashiers State NC Zip Code 28717	Purpose of Disbursement Printing - Business Cards	
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4820.4 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Danwal, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address 12404 Hwy 155 South		Amount of Each Disbursement this Period 10896.69
City Tyler	State TX	
Zip Code 75703	Purpose of Disbursement Yard and Road Signs	Transaction ID : SB17.4820.5
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 455.79
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.4820.6
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2012
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 53.38
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : SB17.4820.7
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 87.00 <b>Transaction ID : SB17.4536</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Compensation - Campaign work Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 212.16 <b>Transaction ID : SB17.4537</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Reimbursement - Copies, Mileage (federal rate), Lunches - no itemization Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 1042.50 <b>Transaction ID : SB17.4863</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Consultant - Campaign Work Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1341.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 217.80 <b>Transaction ID : SB17.4864</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 454.88 <b>Transaction ID : SB17.4910</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : SB17.4911</b>
City Mills River State NC Zip Code 28759	Purpose of Disbursement Compensation - Campaign Work Category/Type 001	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1332.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 885.00 <b>Transaction ID : SB17.5072</b>
City Mills River	State NC Zip Code 28759	
Purpose of Disbursement Compensation - Campaign work	Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Jim Clayton</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2012
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 571.74 <b>Transaction ID : SB17.5100</b>
City Mills River	State NC Zip Code 28759	
Purpose of Disbursement Reimbursement - Supplies, Mileage (federal rate), Dinner - no itemization	Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Tammie Crandall</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address P.O. Box 2705		Amount of Each Disbursement this Period 226.00 <b>Transaction ID : SB17.5003</b>
City Highlands	State NC Zip Code 28741	
Purpose of Disbursement Compensation - Campaign Work	Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1682.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4521</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1024.53 <b>Transaction ID : SB17.4525</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4533</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3624.53
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 95		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 2,000.00 Transaction ID : SB17.4534
City Connellys Springs	State NC	
Purpose of Disbursement Reimbursement - Lunch and Campaign Gift		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1,300.00 Transaction ID : SB17.4590
City Connellys Springs	State NC	
Purpose of Disbursement Compensation - Campaign Work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1,507.38 Transaction ID : SB17.4591
City Connellys Springs	State NC	
Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2908.04
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4682</b>
City Connellys Springs	State NC	
Purpose of Disbursement Compensation - Campaign Work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 85.26 <b>Transaction ID : SB17.4843</b>
City Connellys Springs	State NC	
Purpose of Disbursement Reimbursement - Meals		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 407.92 <b>Transaction ID : SB17.4867</b>
City Connellys Springs	State NC	
Purpose of Disbursement Reimbursement - Office Supplies/Postage		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1793.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 150 Highlands Square Drive		Amount of Each Disbursement this Period 269.32
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement Office Supplies	Transaction ID : SB17.4867.0 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 36.00
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.4867.1 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 102.60
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.4867.2 <b>[MEMO ITEM]</b>
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4895</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1221.00 <b>Transaction ID : SB17.4908</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4941</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement GOP BBQ/Straw Poll Tix	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2921.00
<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 53 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 358.79 <b>Transaction ID : SB17.5052</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Reimbursement - Meals	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. DT'S Blue Ridge Java</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 169 Locust Avenue		Amount of Each Disbursement this Period 178.22 <b>Transaction ID : SB17.5052.0</b> <b>[MEMO ITEM]</b>
City Spruce Pine	State NC	
Zip Code 28777	Purpose of Disbursement Food/Beverages	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.5067</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1658.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. FIA Card Services</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2012
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 1093.91 <b>Transaction ID : SB17.4549</b>
City Wilmington	State DE	
Zip Code 19886-5019	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Grove Park Inn</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2011
Mailing Address 290 Macon Avenue		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.4549.5</b> <b>[MEMO ITEM]</b>
City Asheville	State NC	
Zip Code 28804	Purpose of Disbursement Gift Certificates from Campaign	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. FIA Card Services</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 741.40 <b>Transaction ID : SB17.4599</b>
City Wilmington	State DE	
Zip Code 19886-5019	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1835.31
<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 55 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. The Shady Lawn Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 330 Cranberry Street		Amount of Each Disbursement this Period 277.94
City Newland	State NC	Zip Code 28657
Purpose of Disbursement Meals	Category/ Type 001	Transaction ID : SB17.4599.4
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. The Shady Lawn Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 330 Cranberry Street		Amount of Each Disbursement this Period 62.82
City Newland	State NC	Zip Code 28657
Purpose of Disbursement Meals	Category/ Type 001	Transaction ID : SB17.4599.5
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. FIA Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 2437.16
City Wilmington	State DE	Zip Code 19886-5019
Purpose of Disbursement Credit Card Purchases	Category/ Type 001	Transaction ID : SB17.5016
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2437.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Granny's Country Kitchen</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2012
Mailing Address P.O. Box 1194		Amount of Each Disbursement this Period 13.08
City Icard State Zip Code NC 28666	Purpose of Disbursement Lunch Category/Type 001	Transaction ID : SB17.5016.4
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Chick-Fil-A</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2012
Mailing Address 1832 Hendersonville Road		Amount of Each Disbursement this Period 38.11
City Asheville State Zip Code NC 28803	Purpose of Disbursement Lunch Category/Type 001	Transaction ID : SB17.5016.15
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Chick-Fil-A</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2012
Mailing Address 1832 Hendersonville Road		Amount of Each Disbursement this Period 34.19
City Asheville State Zip Code NC 28803	Purpose of Disbursement Lunch Category/Type 001	Transaction ID : SB17.5016.16
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

**A. Ad-venture Promotions**

Full Name (Last, First, Middle Initial)  
Mailing Address 2625 Regency Road

City Lexington State KY Zip Code 40503

Purpose of Disbursement Marketing - T-Shirts

Candidate Name Meadows for Congress

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: NC District: 11

Date of Disbursement: 02 / 09 / 2012

Amount of Each Disbursement this Period: 1661.51

Transaction ID : SB17.5016.18

[MEMO ITEM]

**B. Jim Fisher**

Full Name (Last, First, Middle Initial)  
Mailing Address 102 Hill Pine Court

City Clemson State SC Zip Code 29631

Purpose of Disbursement Compensation - Campaign work

Candidate Name Meadows for Congress

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: NC District: 11

Date of Disbursement: 03 / 22 / 2012

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.5079

**c. Frontier**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 20550

City Rochester State NY Zip Code 14602-0550

Purpose of Disbursement Telephones

Candidate Name Meadows for Congress

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: NC District: 11

Date of Disbursement: 02 / 07 / 2012

Amount of Each Disbursement this Period: 259.27

Transaction ID : SB17.4654

**SUBTOTAL** of Disbursements This Page (optional) ..... 609.27

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Frontier</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2012
Mailing Address P.O. Box 20550		Amount of Each Disbursement this Period 108.90
City Rochester	State NY	Zip Code 14602-0550
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.4994	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Ashlyn Gerbasi</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 903 N. Wheeler Street		Amount of Each Disbursement this Period 112.79
City Plant City	State FL	Zip Code 33563
Purpose of Disbursement Reimbursement - travel	Category/ Type 002	
Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.4872	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Granny's Country Kitchen</b>		Date of Disbursement MM / DD / YYYY 01 / 26 / 2012
Mailing Address P.O. Box 1194		Amount of Each Disbursement this Period 426.47
City Icard	State NC	Zip Code 28666
Purpose of Disbursement Catering	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>	Transaction ID : SB17.4544	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	648.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Granny's Country Kitchen</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2012
Mailing Address P.O. Box 1194		Amount of Each Disbursement this Period 2619.91 <b>Transaction ID : SB17.4842</b>
City Icard State NC Zip Code 28666	Purpose of Disbursement Breakfast Rally Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Carlton Huffman</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2012
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 301.50 <b>Transaction ID : SB17.4522</b>
City Youngsville State NC Zip Code 27596	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Carlton Huffman</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 975.00 <b>Transaction ID : SB17.4592</b>
City Youngsville State NC Zip Code 27596	Purpose of Disbursement Compensation - Campaign work Category/Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2619.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 166.38 <b>Transaction ID : SB17.4906</b>
City Youngsville	State NC	
Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 564.50 <b>Transaction ID : SB17.4907</b>
City Youngsville	State NC	
Purpose of Disbursement Compensation - Campaign Work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Chris Lloyd</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address Ten Patrick Henry Circle Box 268		Amount of Each Disbursement this Period 320.00 <b>Transaction ID : SB17.4745</b>
City Purcellville	State VA	
Purpose of Disbursement Compensation - Campaign Work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1050.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Andrew Lonon</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address Ten Patrick Henry Circle		Amount of Each Disbursement this Period 360.00 <b>Transaction ID : SB17.4747</b>
City Purcellville	State VA	
Zip Code 20132	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Caleb Loomis</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address Ten Patrick Henry Circle		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : SB17.4749</b>
City Purcellville	State VA	
Zip Code 20132	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Christopher D. McClure</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2012
Mailing Address 129 Poplar Drive		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.5065</b>
City Clyde	State NC	
Zip Code 28721	Purpose of Disbursement Consultant	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2855.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4663</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Office Rent	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 300.50 <b>Transaction ID : SB17.5179</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Acorns - Gifts for campaign workers	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 331.25 <b>Transaction ID : SB17.5175</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Rhodes - Christmas Dinner for campaign staff/volunteers	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1031.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 98.67 <b>Transaction ID : SB17.5155</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Meals; Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4665</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Office Rent	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 196.11 <b>Transaction ID : SB17.5173</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Fuel; Lunches	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	694.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 117.36 <b>Transaction ID : SB17.5177</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Gifts for campaign workers	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 288.16 <b>Transaction ID : SB17.5165</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Bed, Bath & Beyond - bedding for door-to-door volunteers	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1172.93 <b>Transaction ID : SB17.5161</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Bed, Bath & Beyond- bedding for door-to-door volunteers	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1578.45
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 95
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 304.23 <b>Transaction ID : SB17.5157</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 626.16 <b>Transaction ID : SB17.5159</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Ingles - Meals for door-to-door volunteers	Category/ Type 001
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4950</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Office Rent	Category/ Type 001
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1330.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 184.28 <b>Transaction ID : SB17.5149</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Meals; Fuel	001	Category/ Type
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 197.44 <b>Transaction ID : SB17.5151</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Meals; Fuel	001	Category/ Type
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 361.85 <b>Transaction ID : SB17.5171</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Ingles - food for door-to-door volunteers	001	Category/ Type
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	743.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 488.18 <b>Transaction ID : SB17.5163</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Ingles - food for door-to-door volunteers		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 148.95 <b>Transaction ID : SB17.5167</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Gifts for door-to-door volunteers		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : SB17.5169</b>
City Highlands	State NC	
Purpose of Disbursement In-kind - Fuel; Food for door-to-door volunteers		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	488.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 189.81 <b>Transaction ID : SB17.5153</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Meals, Parking, Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 359.25 <b>Transaction ID : SB17.5303</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-kind - Travel - Hilton Asheville Biltmore Park	Category/ Type 002
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Jeffery L. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 1110 4th Avenue West		Amount of Each Disbursement this Period 1276.80 <b>Transaction ID : SB17.4778</b>
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Reimbursement	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1825.86
<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 69 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Friends of NRA</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 33 Sherwood Forest Drive		Amount of Each Disbursement this Period 270.00
City Arden	State NC	
Zip Code 28704	Purpose of Disbursement Meal Tickets	Transaction ID : SB17.4778.1
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Sam's Club</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2012
Mailing Address 300 Highlands Square Drive		Amount of Each Disbursement this Period 922.96
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement Office Equipment	Transaction ID : SB17.4778.3
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Morris Broadband, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address P.O. Box 71086		Amount of Each Disbursement this Period 220.88
City Charlotte	State NC	
Zip Code 28272-1086	Purpose of Disbursement Cable	Transaction ID : SB17.4792
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	220.88
<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 70 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Morris Broadband, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012
Mailing Address P.O. Box 71086		Amount of Each Disbursement this Period 112.59 <b>Transaction ID : SB17.5077</b>
City Charlotte	State NC	
Zip Code 28272-1086	Purpose of Disbursement Cable	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. North Carolina State Board of Elections</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address 441 North Harrington Street		Amount of Each Disbursement this Period 1740.00 <b>Transaction ID : SB17.4676</b>
City Raleigh	State NC	
Zip Code 27603	Purpose of Disbursement Filing Fee	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Ron Pressley</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 5 Hearth Stone Lane		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4709</b>
City Flat Rock	State NC	
Zip Code 28731	Purpose of Disbursement Telephone System Installation	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2252.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Ron Pressley</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 5 Hearth Stone Lane		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.4993</b>
City Flat Rock	State NC	
Zip Code 28731	Purpose of Disbursement Telephone Lease	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. QGIV</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period 14.02 <b>Transaction ID : SB17.4648</b>
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. QGIV</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period 24.61 <b>Transaction ID : SB17.4969</b>
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. QGIV</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period 31.85 <b>Transaction ID : SB17.5318</b>
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark Seymour</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 302 N. Lee Street		Amount of Each Disbursement this Period 217.00 <b>Transaction ID : SB17.4999</b>
City Bishopville	State SC	
Zip Code 29010	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Sierra Investment Properties, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4523</b>
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1248.85
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 229.99 <b>Transaction ID : SB17.4527</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Utilities 001 Category/Type	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4593</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 297.66 <b>Transaction ID : SB17.4656</b>
City Hendersonville State NC Zip Code 28739	Purpose of Disbursement Utilities 001 Category/Type	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1527.66
<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 74 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PSNC Energy</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2012
Mailing Address P.O. Box 100256		Amount of Each Disbursement this Period 142.00
City Columbia	State SC	
Zip Code 29202-3256	Purpose of Disbursement Utilities - Gas	Transaction ID : SB17.4656.0
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 1000.00
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Office Rent	Transaction ID : SB17.4905
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 402.38
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Utilities	Transaction ID : SB17.4976
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1402.38
<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 75 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PSNC Energy</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2012
Mailing Address P.O. Box 100256		Amount of Each Disbursement this Period 142.00
City Columbia	State SC	
Zip Code 29202-3256	Purpose of Disbursement Utilities - Gas	Transaction ID : SB17.4976.0
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Duke Energy</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address P.O. Box 70516		Amount of Each Disbursement this Period 184.97
City Charlotte	State NC	
Zip Code 28272-0516	Purpose of Disbursement Utilities - Electricity	Transaction ID : SB17.4976.2
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00
City Asheville	State NC	
Zip Code 28778	Purpose of Disbursement Consultant	Transaction ID : SB17.4526
Candidate Name <b>Meadows for Congress</b>	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.00
<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 76 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4532</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4538</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 391.28 <b>Transaction ID : SB17.4539</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	591.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.4548</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 807.57 <b>Transaction ID : SB17.4572</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Travel Reimbursement 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 318.20 <b>Transaction ID : SB17.4572.0</b> <b>[MEMO ITEM]</b>
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Airfare 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	907.57
<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 78 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. L'Enfant Plaza Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 480 L'Enfant Plaza, SW			Amount of Each Disbursement this Period 268.66
City Washington	State DC	Zip Code 20024	Transaction ID : SB17.4572.1 <b>[MEMO ITEM]</b>
Purpose of Disbursement Hotel		001 Category/ Type	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>B. L'Enfant Plaza Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 480 L'Enfant Plaza, SW			Amount of Each Disbursement this Period 220.71
City Washington	State DC	Zip Code 20024	Transaction ID : SB17.4572.2 <b>[MEMO ITEM]</b>
Purpose of Disbursement Hotel		001 Category/ Type	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>c. Patricia Smothers</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 130 Dalya Road			Amount of Each Disbursement this Period 262.75
City Asheville	State NC	Zip Code 28778	Transaction ID : SB17.4594
Purpose of Disbursement Reimbursement - Taxis, Meals - no itemization		001 Category/ Type	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	262.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4598</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4675</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4787</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<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 80 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 197.76 <b>Transaction ID : SB17.4789</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Reimbursement - Beverages, Name tags, Mileage (Federal Mileage Rate) Category/Type 003	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4847</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant Category/Type 003	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 82.94 <b>Transaction ID : SB17.4903</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Reimbursement - Food Category/Type 003	
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	380.70
<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 81 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4904</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 306.80 <b>Transaction ID : SB17.4940</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Mileage Reimbursement - Federal Mileage Rate 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4974</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	506.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5070</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 285.27 <b>Transaction ID : SB17.5071</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Reimbursement - Mileage (Federal Mileage Rate) 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Patricia Smothers</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2012
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5098</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant 003 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	485.27
<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 83 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jonathan Snowling</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4595</b>
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Jonathan Snowling</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4683</b>
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Jonathan Snowling</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 657.94 <b>Transaction ID : SB17.4711</b>
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Reimbursement for Office Equipment/Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5157.94
<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 84 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Hewlett Packard Company</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2012
Mailing Address 3000 Hanover Street		Amount of Each Disbursement this Period 384.27
City Palo Alto	State CA Zip Code 94304	
Purpose of Disbursement LaserJet Printer	Category/Type 001	Transaction ID : SB17.4711.0  [MEMO ITEM]
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address 150 Highlands Square Drive		Amount of Each Disbursement this Period 84.34
City Hendersonville	State NC Zip Code 28792	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : SB17.4711.3  [MEMO ITEM]
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Jonathan Snowling</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 1500.00
City Fort Washington	State MD Zip Code 20744	
Purpose of Disbursement Compensation - Campaign work	Category/Type 001	Transaction ID : SB17.4898
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jonathan Snowling</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 1489.75 <b>Transaction ID : SB17.4899</b>
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Reimbursement for Office Equipment/Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 150 Highlands Square Drive		Amount of Each Disbursement this Period 173.99 <b>Transaction ID : SB17.4899.0</b>
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Lowe's</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2012
Mailing Address 1415 7th Avenue East		Amount of Each Disbursement this Period 1315.76 <b>Transaction ID : SB17.4899.1</b>
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement Materials for posting signs	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1489.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jonathan Snowling</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 1212 Swan Harbour Circle		Amount of Each Disbursement this Period 9999.99 8622.14 <b>Transaction ID : SB17.4939</b>
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Consultant Fee	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2012
Mailing Address P.O. Box 183174		Amount of Each Disbursement this Period 9999.99 349.93 <b>Transaction ID : SB17.4878</b>
City Columbus	State OH	
Zip Code 43218-3174	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Strategic Media Placement, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2012
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 9999.99 945.25 <b>Transaction ID : SB17.4640</b>
City Delaware	State OH	
Zip Code 43015	Purpose of Disbursement Radio Buy	Category/ Type 004
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9917.32
<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 87 OF 95			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 2200.00 <b>Transaction ID : SB17.4528</b>
City Alpharetta State GA Zip Code 30022	Category/Type 001	
Purpose of Disbursement Facebook Advertising	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 5200.00 <b>Transaction ID : SB17.4535</b>
City Alpharetta State GA Zip Code 30022	Category/Type 001	
Purpose of Disbursement Design, Production and Buildout - Website	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 2115.00 <b>Transaction ID : SB17.4672</b>
City Alpharetta State GA Zip Code 30022	Category/Type 001	
Purpose of Disbursement Hand Out Cards	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9515.00
<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 88 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 3485.13 <b>Transaction ID : SB17.4790</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Brochures 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 214.00 <b>Transaction ID : SB17.4846</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Brochures 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. The Stoneridge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 5700.00 <b>Transaction ID : SB17.4943</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Pro Life Mailers 001 Category/Type	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9399.13
<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 89 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 22800.00 <b>Transaction ID : SB17.5005</b>
City Alpharetta	State GA	Zip Code 30022	
Purpose of Disbursement Mailers		Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>B. The Stoneridge Group, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 397.56 <b>Transaction ID : SB17.4992</b>
City Alpharetta	State GA	Zip Code 30022	
Purpose of Disbursement Marketing - List Purchases		Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>c. Tower Digital</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2012
Mailing Address 685 Club Drive			Amount of Each Disbursement this Period 1640.00 <b>Transaction ID : SB17.4673</b>
City Athens	State GA	Zip Code 30607	
Purpose of Disbursement Database Development		Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24837.56
<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 90 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Eric Turnbaugh</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 24 Blades Drive		Amount of Each Disbursement this Period 320.00 <b>Transaction ID : SB17.4751</b>
City Dover	State DE	
Zip Code 19901	Purpose of Disbursement Compensation - Campaign Work	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Unicom</b>		Date of Disbursement MM / DD / YYYY 01 / 26 / 2012
Mailing Address P.O.Box 289		Amount of Each Disbursement this Period 55.04 <b>Transaction ID : SB17.4546</b>
City Franklin	State NC	
Zip Code 28744-0289	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Unicom</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2012
Mailing Address P.O.Box 289		Amount of Each Disbursement this Period 57.13 <b>Transaction ID : SB17.4819</b>
City Franklin	State NC	
Zip Code 28744-0289	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	432.13
<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 91 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Unicom</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address P.O.Box 289		Amount of Each Disbursement this Period 55.97 <b>Transaction ID : SB17.5099</b>
City Franklin	State NC	
Zip Code 28744-0289	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 924.00 <b>Transaction ID : SB17.4524</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1650.00 <b>Transaction ID : SB17.4597</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2629.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 95		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Pamela G. Ward</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1380.50 <b>Transaction ID : SB17.4894</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1380.50
<b>TOTAL</b> This Period (last page this line number only).....	139549.22

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

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

Transaction ID : **SC/10.4101**

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

**[PERSONAL FUNDS]**

Election: 2012

**Mark R Meadows**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
P.O. Box 811

City State ZIP Code  
Highlands NC 28741

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

**TERMS**

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

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	250000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	250000.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Meadows for Congress**

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

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4362

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4364

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

**Mark R Meadows**

Nature of Debt (Purpose):

Marketing - Handout Cards

Mailing Address P.O. Box 811

City State Zip Code  
Highlands NC 28741

Outstanding Balance Beginning This Period

199.75

Transaction ID : SD10.4363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

199.75

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

2199.75

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

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

250000.00

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

250000.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Meadows for Congress**

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

**Mark R Meadows**

Nature of Debt (Purpose):

Testing the Waters - Consultant

Mailing Address P.O. Box 811

City State

Zip Code

Highlands

NC

28741

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4365

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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) .....

1000.00

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

3199.75

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

250000.00

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

253199.75