

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Dec 5 11 50 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (Include) North Carolina Medical Society Federal Political Education and Action Committee	
ADDRESS (number and street) PO Box 25834 222 N. Person Street	<input type="checkbox"/> Check if different than previously reported
CITY, STATE and ZIP CODE Raleigh, NC 27611	2. FEC IDENTIFICATION NUMBER C-00003152
	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) Prior to 1/94

4. TYPE OF REPORT

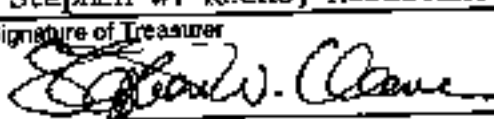
- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

- ☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

- ☐ 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
☒ 30-Day Post-Election Report following the General Election
on 11/3/98 in the State of NC

- (b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/98 through 11/23/98			
6. (a) Cash on Hand January 1, 1998			\$ 18,741.93
(b) Cash on Hand at Beginning of Reporting Period		\$ 28,143.17	
(c) Total Receipts (from Line 18)		\$ 10,379.64	\$ 59,904.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 38,522.81	\$ 78,646.81
7. Total Disbursements (from Line 30)		\$ 34,765.00	\$ 74,883.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 3,763.81	\$ 3,763.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	For further information contact Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-3100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer Stephen W. Keene, Assistant Treasurer			
Signature of Treasurer 			Date 11/30/98

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE North Carolina Medical Society Federal Political Education and Action Committee		REPORT COVERING PERIOD FROM 10/1/98 TO 11/23/98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		-0-	-0-
i. Itemized (use Schedule A)		10,329.00	58,513.00
ii. Unitemized		10,329.00	58,513.00
iii. Total	(add i and ii) >	-0-	-0-
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		10,329.00	58,513.00
d. Total Contributions	(add a ii, b and c) >	-0-	855.00
12. Transfers From Affiliated/Other Party Committees		-0-	-0-
13. All Loans Received		-0-	-0-
14. Loan Repayments Received		-0-	45.44
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		50.64	491.44
17. Other Federal Receipts (Dividends, Interest, etc.)		-0-	-0-
18. Transfers from Nonfederal Account for Joint Activity		10,379.64	59,904.88
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	10,379.64	59,904.88
20. Total Federal Receipts	(subtract line 16 from line 19) >		
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)		-0-	-0-
i. Federal Share		-0-	-0-
ii. Non-Federal Share		200.00	253.00
b. Other Federal Operating Expenditures		200.00	253.00
c. Total Operating Expenditures	(add a i, a ii, and b) >	8,565.00	48,600.00
22. Transfers to Affiliated/Other Party Committees		-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees		-0-	-0-
24. Independent Expenditures (use Schedule E)		-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		-0-	-0-
26. Loan Repayments Made		-0-	-0-
27. Loans Made			
28. Refunds of Contributions To:		-0-	30.00
a. Individual/Persons Other Than Political Committees		-0-	-0-
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	30.00
d. Total Contribution Refunds	(add a, b and c) >	26,000.00	26,000.00
29. Other Disbursements		34,765.00	74,883.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,765.00	74,883.00
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >		
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		10,329.00	58,513.00
33. Total Contribution Refunds (from line 28d)		-0-	30.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		10,329.00	58,483.00
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	200.00	253.00
36. Offsets to Operating Expenditures (from line 15)		-0-	45.44
37. Net Operating Expenditures	(subtract line 36 from 35) >	200.00	207.56

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code First Union National Bank PO Box 3008 Raleigh, NC 27601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Occupation Aggregate Year-to-Date > \$ 491.44	Date (month, day, year) 10/30/98	Amount of Each Receipt this Period 50.64
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$50.64

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER
21b

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NAME OF COMMITTEE (in Full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code Don C. Chaplin, MD 1234 Huffman Mill Road Burlington, NC 27215	Purpose of Disbursement Reimbursement for peer-to-peer recruitment prize Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/14/96	Amount of Each Disbursement This Period \$200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$200.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 22

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NAME OF COMMITTEE (in full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code American Medical Political Action Committee 1101 Vermont Ave., NW Washington, DC 20005	Purpose of Disbursement Voluntary membership contributions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/12/98 10/16/98	Amount of Each Disbursement This Period 100.00 605.00
B. Full Name, Mailing Address and ZIP Code American Medical Political Action Committee 1101 Vermont Ave., NW Washington, DC 20005	Purpose of Disbursement Voluntary membership contributions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/10/98 11/23/98	Amount of Each Disbursement This Period 3,020.00 4,840.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

8,565.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 1 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)
North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code Beverly Perdue for NC Senate PO Box 991 New Bern, NC 28563	Purpose of Disbursement Debt Retirement- District 3 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$2,000.00
B. Full Name, Mailing Address and ZIP Code Howard Lee for NC Senate 109 Glenview Place Chapel Hill, NC 27514	Purpose of Disbursement Debt Retirement District 16 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 2,000.00
C. Full Name, Mailing Address and ZIP Code William Purcell for NC Senate 1301 Dunbar Drive Laurinburg, NC 28352	Purpose of Disbursement Debt Retirement District 17 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 2,000.00
D. Full Name, Mailing Address and ZIP Code Charlie Albertson for NC Senate 136 Henry Dunn Pickett Road Beulaville, NC 28518	Purpose of Disbursement Debt Retirement District 5 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Marc Basnight for NC Senate 381 Mother Vineyard Road Manteo, NC 27954	Purpose of Disbursement Debt Retirement District 1 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Roy Cooper for NC Senate PO Drawer 4538 Rocky Mount, NC 27803	Purpose of Disbursement Debt Retirement District 10 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Tony Rand for NC Senate 1600 Morganton Road Fayetteville, NC 28305	Purpose of Disbursement Debt Retirement District 24 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Fountain Odom for NC Senate 15131 Birling Ct. Charlotte, NC 28278	Purpose of Disbursement Debt Retirement District 34 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
I. Full Name, Mailing Address and ZIP Code Patrick Ballentine for NC Senate 6008 Forest Creek Circle Wilmington, NC 28402	Purpose of Disbursement Debt Retirement District 4 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional)

12,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code Betsy Cochran for NC Senate 122 Azalea Circle Advance, NC 27006	Purpose of Disbursement Debt Retirement District 38 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code James Forrester for NC Senate 1104 Stanley-Lucia Road Mt. Holly, NC 28120	Purpose of Disbursement Debt Retirement District 39 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Fletcher Hartsell for NC Senate 129 Overbrook Drive, NE Concord, NC 28025	Purpose of Disbursement Debt Retirement District 22 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Frank Balance for NC Senate PO Box 616 Warrenton, NC 27589	Purpose of Disbursement Debt Retirement District 2 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
E. Full Name, Mailing Address and ZIP Code Bob Martin for NC Senate PO Box 387 Bethel, NC 27812	Purpose of Disbursement Debt Retirement District 6 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
F. Full Name, Mailing Address and ZIP Code Ed Warren for NC Senate 227 Country Club Drive Greenville, NC 27834	Purpose of Disbursement Debt Retirement District 9 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
G. Full Name, Mailing Address and ZIP Code Luther Jordan for NC Senate 312 S. Seventh Street Wilmington, NC 28401	Purpose of Disbursement Debt Retirement District 7 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
H. Full Name, Mailing Address and ZIP Code Allen Wellons for NC Senate PO Box 986 Smithfield, NC 27577	Purpose of Disbursement Debt Retirement District 11 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
I. Full Name, Mailing Address and ZIP Code Jeanne Lucas for NC Senate 4504 Glenn Road Durham, NC 27704	Purpose of Disbursement Debt Retirement District 13 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00

SUBTOTAL of Disbursements This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code Wib Gulley for NC Senate 400 West Main Street Durham, NC 27701	Purpose of Disbursement Debt Retirement District 13 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
B. Full Name, Mailing Address and ZIP Code Brad Miller for NC Senate 3211 Coleridge Drive Raleigh, NC 27609	Purpose of Disbursement Debt Retirement District 14 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
C. Full Name, Mailing Address and ZIP Code Eric Reeves for NC Senate 206 E. Park Drive Raleigh, NC 27605	Purpose of Disbursement Debt Retirement District 14 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
D. Full Name, Mailing Address and ZIP Code Oscar Harris for NC Senate PO Box 578 Dunn, NC 28335	Purpose of Disbursement Debt Retirement District 15 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
E. Full Name, Mailing Address and ZIP Code RC Soles for NC Senate PO Box 6 Tabor City, NC 28463	Purpose of Disbursement Debt Retirement District 18 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
F. Full Name, Mailing Address and ZIP Code Linda Garrou for NC Senate 3910 Camerillie Farm Road Winston-Salem, NC 27106	Purpose of Disbursement Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
G. Full Name, Mailing Address and ZIP Code Jim Phillips for NC Senate 400 Western Blvd. Lexington, NC 27293	Purpose of Disbursement Debt Retirement District 23 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
H. Full Name, Mailing Address and ZIP Code Austin Allran for NC Senate Box 2907 Hickory, NC 28603	Purpose of Disbursement Debt Retirement District 26 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
I. Full Name, Mailing Address and ZIP Code Kay Hagan for NC House 305 Meadowbrook Terrace Greensboro, NC 27408	Purpose of Disbursement Debt Retirement District 32 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00

SUBTOTAL of Disbursements This Page (optional)

\$4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

North Carolina Medical Society Federal Political Education and Action Committee

A. Full Name, Mailing Address and ZIP Code David Weinstein for NC Senate 206 W. 31st Street Lumberton, NC 28358	Purpose of Disbursement Debt Retirement District 30 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
B. Full Name, Mailing Address and ZIP Code William Martin for NC Senate PO Box 21325 Greensboro, NC 27420	Purpose of Disbursement Debt Retirement District 31 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
C. Full Name, Mailing Address and ZIP Code Bob Rucho for NC Senate 400 Trafalgar Place Matthews, NC 28105	Purpose of Disbursement Debt Retirement District 35 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
D. Full Name, Mailing Address and ZIP Code John Carrington for NC Senate 14209 Cross Creek Drive Raleigh, NC 27615	Purpose of Disbursement Debt Retirement District 36 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
E. Full Name, Mailing Address and ZIP Code Walter Dalton for NC Senate 560 N. Main Street Rutherfordton, NC 28139	Purpose of Disbursement Debt Retirement District 37 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
F. Full Name, Mailing Address and ZIP Code Larry Shaw for NC Senate 1009 Hay Street Fayetteville, NC 28305	Purpose of Disbursement Debt Retirement District 41 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$500.00
G. Full Name, Mailing Address and ZIP Code Steve Metcalf for NC Senate PO Box 1694 Asheville, NC 28802	Purpose of Disbursement Debt Retirement District 28 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$250.00
H. Full Name, Mailing Address and ZIP Code Charles Carter for NC Senate 21 Haywood St., Apt. 3A Asheville, NC 28801	Purpose of Disbursement Debt Retirement District 28 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period \$250.00
I. Full Name, Mailing Address and ZIP Code 	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$3,500.00

TOTAL This Period (last page this line number only)

\$26,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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AA
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