



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Ward and Smith, P. A. Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="34878.99"/>	<input type="text" value="34878.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="34878.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="72500.00"/>	<input type="text" value="72500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="107378.99"/>	<input type="text" value="107378.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12500.00"/>	<input type="text" value="12500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="94878.99"/>	<input type="text" value="94878.99"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 06/2004)

Write or Type Committee Name

**Ward and Smith, P. A. Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	72500.00	72500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	72500.00	72500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	72500.00	72500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	72500.00	72500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	72500.00	72500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	9500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	3000.00	3000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12500.00	12500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12500.00	12500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	72500.00	72500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	72500.00	72500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Derek J. Allen**

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2011  
**Transaction ID : SA11AI.4164**

Amount of Each Receipt this Period  
 1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. William Joseph Austin Jr.**

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4166**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2011  
**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
 2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A. Albert R. Bell Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2011

**Transaction ID : SA11AI.4170**

Amount of Each Receipt this Period  
2000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2011

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2011

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
1500.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 01 / 05 / 2011  
**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 01 / 18 / 2011  
**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4180**

Amount of Each Receipt this Period  
 2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A. William S. Durr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Post Office Box 867  
 City State Zip Code  
 New Bern NC 28563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ward and Smith, P.A. Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2011  
**Transaction ID : SA11AI.4182**  
 Amount of Each Receipt this Period  
 2000.00  
 Contribution

**B. Donalt J. Eglinton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Post Office Box 867  
 City State Zip Code  
 New Bern NC 28563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ward and Smith, P. A. Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4184**  
 Amount of Each Receipt this Period  
 2000.00  
 Contribution

**C. A. Charles Ellis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Post Office Box 867  
 City State Zip Code  
 New Bern NC 28563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ward and Smith, P.A. Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4186**  
 Amount of Each Receipt this Period  
 5000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A. Lynwood P. Evans**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	03	/	2011

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period  
2000.00

Contribution

**B. Michael P. Flanagan**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2011

**Transaction ID : SA11AI.4190**

Amount of Each Receipt this Period  
2000.00

Contribution

**C. Samuel B. Franck**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	03	/	2011

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A. S. McKinley Gray III**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 05 / 2011**

**Transaction ID : SA11AI.4194**

Amount of Each Receipt this Period  
**2000.00**

Contribution

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

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 07 / 2011**

**Transaction ID : SA11AI.4196**

Amount of Each Receipt this Period  
**2000.00**

Contribution

**C. Merrill G. Jones II**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 17 / 2011**

**Transaction ID : SA11AI.4198**

Amount of Each Receipt this Period  
**2000.00**

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2011

**Transaction ID : SA11AI.4200**

Amount of Each Receipt this Period  
2000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2011

**Transaction ID : SA11AI.4202**

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2011

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Lance P. Martin**

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2011  
**Transaction ID : SA11AI.4206**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2011  
**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4210**

Amount of Each Receipt this Period  
 5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9000.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Jeannette A. Parrott**

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 01 / 14 / 2011  
**Transaction ID : SA11AI.4212**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4214**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 01 / 17 / 2011  
**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
 2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Samuel H. Poole**

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2011  
**Transaction ID : SA11AI.4218**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2011  
**Transaction ID : SA11AI.4220**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City State Zip Code  
 New Bern NC 28563

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

Name of Employer Occupation  
 Ward and Smith, P.A. Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2011  
**Transaction ID : SA11AI.4222**

Amount of Each Receipt this Period  
 2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A. Stanley M. Sams**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2011  
**Transaction ID : SA11AI.4224**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 06 / 2011  
**Transaction ID : SA11AI.4226**

Amount of Each Receipt this Period  
 2000.00

Contribution

**C. Frank H. Sheffield Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern State NC Zip Code 28563

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

Name of Employer Ward and Smith, P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 24 / 2011  
**Transaction ID : SA11AI.4228**

Amount of Each Receipt this Period  
 2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2011

**Transaction ID : SA11AI.4230**

Amount of Each Receipt this Period  
2000.00

Contribution

**B. H. L. Stephenson III**  
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2011

**Transaction ID : SA11AI.4232**

Amount of Each Receipt this Period  
2000.00

Contribution

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

Mailing Address Post Office Box 867

City New Bern	State NC	Zip Code 28563
------------------	-------------	-------------------

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

Name of Employer Ward and Smith, P.A.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	11	/	2011

**Transaction ID : SA11AI.4234**

Amount of Each Receipt this Period  
2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 18 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**A. Rexford Willis III**

Mailing Address Post Office Box 867

City State Zip Code  
New Bern NC 28563

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

Name of Employer Occupation  
Ward and Smith, P.A. Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2011

**Transaction ID : SA11AI.4236**

Amount of Each Receipt this Period  
1000.00

Contribution

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	72500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BOEHNER FOR SPEAKER COMMITTEE**

Mailing Address 631-B PENNSYLVANIA AVE., SE  
BASEMENT UNIT

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.4238

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BUTTERFIELD, G K**

Mailing Address 2407 BEL AIR AVENUE

City WILSON State NC Zip Code 27893

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	1

Transaction ID : SB23.4240

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MIKE MCINTYRE FOR CONGRESS**

Mailing Address P.O. BOX 1

City LUMBERTON State NC Zip Code 28359

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	1

Transaction ID : SB23.4242

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

5	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Ward and Smith, P. A. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. WALTER JONES COMMITTEE**

Mailing Address PO BOX 3962

City GREENVILLE State NC Zip Code 27836

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2011

**Transaction ID : SB23.4244**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. WALTER JONES COMMITTEE**

Mailing Address PO BOX 3962

City GREENVILLE State NC Zip Code 27836

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2011

**Transaction ID : SB23.4245**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

4000.00
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9500.00
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