

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Palombo for Congress Committee

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))....	20458.89	20458.89
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20458.89	20458.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6240.76	6240.76
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6240.76	6240.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	14218.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2380	

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)

Page 3

Write or Type Committee Name

Palombo for Congress Committe

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17437.5	17437.5
(ii) Unitemized.....	2102	2102
(iii) TOTAL of contributions from individuals ▶	19539.5	19539.5
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) The Candidate.....	919.39	919.39
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	20458.89	20458.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	20458.89	20458.89

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6240.76	6240.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6240.76	6240.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20458.89
25. SUBTOTAL (add Line 23 and Line 24).....	20458.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6240.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	14218.13

**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 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Reba Arnold Aylward		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 10 / 2011	
Mailing Address 106 Allen Dr		Transaction ID : SA11Ai-CN26	
City New Bern	State NC	Zip Code 28562	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer John Aylward Research	Occupation Customer Relations		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) B. Sabrina Bengel		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2011	
Mailing Address 329 Middle St A		Transaction ID : SA11Ai-CN31	
City New Bern	State NC	Zip Code 28560	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer City of New Bern	Occupation Alderman		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) C. James Martin Bisbee		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2011	
Mailing Address 2349 Chinquapin Rd		Transaction ID : SA11Ai-CN32	
City New Bern	State NC	Zip Code 28562	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer 323 Studios Art Gallery	Occupation Owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Harold William Blot

Mailing Address 109 Lugano Rd

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
A Dog's Dream Owner/Operator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2011

Transaction ID : SA11Ai-CN39

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms. Susan Mccrory Braaten

Mailing Address 4506 Morgan Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Keller-williams Realty Real Estate Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2011

Transaction ID : SA11Ai-CN42

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Sherry Ann Bradbury

Mailing Address 129 St Gallen Ct

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
retired retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : SA11Ai-CN47

Amount of Each Receipt this Period
250

TrnsRef: 41817831 CustRef: 10053851

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Marion Carlo

Mailing Address 10 Easton St

City State Zip Code
Stony Point NY 10980

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2011

Transaction ID : SA11Ai-CN36

Amount of Each Receipt this Period
250

TrnsRef: 41661859 CustRef: 10035445

B. Full Name (Last, First, Middle Initial)
Marion Carlo

Mailing Address 10 Easton St

City State Zip Code
Stony Point NY 10980

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1150

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : SA11Ai-CN53

Amount of Each Receipt this Period
900

TrnsRef: 41839859 CustRef: 10035445

C. Full Name (Last, First, Middle Initial)
Mr. Robert Thomas Conway

Mailing Address 101 Montreux Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
SELF Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2011

Transaction ID : SA11Ai-CN44

Amount of Each Receipt this Period
250

TrnsRef: 41797621 CustRef: 10050063

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

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

1400.00

**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 19
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Donald Edward Deichmann Jr

Mailing Address 116 Trent Shores Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Trent Cadillacbuickgmc Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 28 2011

Transaction ID : SA11Ai-CN40

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Frank T Fragale

Mailing Address 150 Buffalo Rd

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
River Bend Country Club Co-Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 18 2011

Transaction ID : SA11Ai-CN5

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Scott C Hart

Mailing Address 416 Pollock Street
Drawer 889

City State Zip Code
New Bern NC 28563

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

Name of Employer Occupation
Sumrel. Sugg Carmichael Hicks Hart Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 23 2011

Transaction ID : SA11Ai-CN55

Amount of Each Receipt this Period
250

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 9 OF 19
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Camille M Hoffman

Mailing Address 104 Plantation Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2011

Transaction ID : SA11Ai-CN7

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
James L Hoffman

Mailing Address 104 Plantation Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2011

Transaction ID : SA11Ai-CN6

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Sandra Sue Mattingly

Mailing Address 710 Hightree Ln E

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 25 / 2011

Transaction ID : SA11Ai-CN17

Amount of Each Receipt this Period
500

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

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

5500.00

**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 10 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Carol J Mattocks

Mailing Address 5307 Trent Woods Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Housewife Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 17 / 2011

Transaction ID : SA11Ai-CN33

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
John Robert Mattocks

Mailing Address 5303 Trent Woods Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Williams Energy Group President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2011

Transaction ID : SA11Ai-CN23

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Robert Lynwood Mattocks

Mailing Address 5307 Trent Woods Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Jenkins Gas Company President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2011

Transaction ID : SA11Ai-CN24

Amount of Each Receipt this Period
500

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 11 OF 19
	<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)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Patrick Owen McCullough

Mailing Address 4315 Country Club Rd

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Pat McCullough Development Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2011

Transaction ID : SA11Ai-CN25

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Thomas Robert Meutsch

Mailing Address 2023 Royal Pines Dr

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
Tom's Tunes LLC Entertainer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
387.5

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 24 / 2011

Transaction ID : SA11Ai-CN22

Amount of Each Receipt this Period
387.5

music and video services
In-Kind Received music and video services

C. Full Name (Last, First, Middle Initial)
William Graham Champion Mitchell

Mailing Address 3009 River Ln

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : SA11Ai-CN35

Amount of Each Receipt this Period
1500

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

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

2387.50

**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 12 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. Stockton Reeves

Mailing Address 1491 Mizell Ave

City Winter Park State FL Zip Code 32789

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

Name of Employer The Center for Public Safety Inc. Occupation Consulting

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : SA11Ai-CN51

Amount of Each Receipt this Period
250

TrnsRef: 41837953 CustRef: 10056399

B. Full Name (Last, First, Middle Initial)
Antoinette Salvati

Mailing Address 609 Alexis Dr

City New Bern State NC Zip Code 28562

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 25 / 2011

Transaction ID : SA11Ai-CN18

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Dorothy M Salvati

Mailing Address 609 Alexis Dr

City New Bern State NC Zip Code 28562

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 25 / 2011

Transaction ID : SA11Ai-CN19

Amount of Each Receipt this Period
300

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

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

850.00

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

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

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Robert L Stallings III

Mailing Address 4905 Trent Woods Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Eastern Aviation Fuels Inc President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 23 2011

Transaction ID : SA11Ai-CN9

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Trawick Hamilton Stubbs Jr

Mailing Address 212 Middle St
402

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
Stubbs & Perdue P. A. Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 15 2011

Transaction ID : SA11Ai-CN34

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Jeannie M Tyson

Mailing Address 4507 W Fairway Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Tyson & Hooks Real Estate Real Estate Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 23 2011

Transaction ID : SA11Ai-CN49

Amount of Each Receipt this Period
500

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

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

1050.00

17437.50

**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 14 OF 19
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial) Frank Palombo		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2011
Mailing Address 1502 Tryon Rd		Transaction ID : SA11D-CN27
City New Bern	State NC	
Zip Code 28560		Amount of Each Receipt this Period 100
FEC ID number of contributing federal political committee. C H2NC03079		In-Kind Received Photography services
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100	

B. Full Name (Last, First, Middle Initial) Frank Palombo		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2011
Mailing Address 1502 Tryon Rd		Transaction ID : SA11D-CN28
City New Bern	State NC	
Zip Code 28560		Amount of Each Receipt this Period 712.06
FEC ID number of contributing federal political committee. C H2NC03079		In-Kind Received Palm Cards
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 812.06	

C. Full Name (Last, First, Middle Initial) Frank Palombo		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2011
Mailing Address 1502 Tryon Rd		Transaction ID : SA11D-CN29
City New Bern	State NC	
Zip Code 28560		Amount of Each Receipt this Period 107.33
FEC ID number of contributing federal political committee. C H2NC03079		In-Kind Received Dare M&G Food
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 919.39	

SUBTOTAL of Receipts This Page (optional).....	919.39
TOTAL This Period (last page this line number only).....	919.39

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

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

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011	
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 1000.00	
City Minneapolis	State MN	Zip Code 55427	Transaction ID : SB17-EX7	
Purpose of Disbursement Campaign software		Category/Type 001	Campaign software	
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) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2011	
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 1000.00	
City Minneapolis	State MN	Zip Code 55427	Transaction ID : SB17-EX8	
Purpose of Disbursement Campaign software		Category/Type 001	Campaign software	
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) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Leah Parchinski			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2011	
Mailing Address 215 Allen Lane			Amount of Each Disbursement this Period 400.00	
City Melbourne Beach	State FL	Zip Code 32951	Transaction ID : SB17-EX3	
Purpose of Disbursement design of logo and palm cards		Category/Type 006	design of logo and palm cards	
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) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2400.00
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 16 OF 19			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Leah Parchinski			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2011		
Mailing Address 215 Allen Lane			Amount of Each Disbursement this Period 200.00		
City Melbourne Beach	State FL	Zip Code 32951	Transaction ID : SB17-EX4		
Purpose of Disbursement Invitation design		Category/ Type 006			
Candidate Name		Invitation design			
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) Primary 2012				
State: District:					

Full Name (Last, First, Middle Initial) B. New Bern Riverfront Convention Center			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011		
Mailing Address 203 South Front Street			Amount of Each Disbursement this Period 425.00		
City New Bern	State NC	Zip Code 28563	Transaction ID : SB17-EX5		
Purpose of Disbursement venue rental		Category/ Type 007			
Candidate Name		venue rental			
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) Primary 2012				
State: District:					

Full Name (Last, First, Middle Initial) c. Terra Eclipse			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2011		
Mailing Address 9043 Soquel Drive Attn: NetBoots			Amount of Each Disbursement this Period 1200.00		
City Aptos	State CA	Zip Code 95003	Transaction ID : SB17-EX9		
Purpose of Disbursement website		Category/ Type 001			
Candidate Name		website			
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) Primary 2012				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1825.00
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 17 OF 19	
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Malia Zaytoun			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2011	
Mailing Address 2610 Oldgate Dr #304			Amount of Each Disbursement this Period 400.00	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SB17-EX17	
Purpose of Disbursement Consulting Fees		Category/Type 001	Consulting Fees	
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) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Thomas Robert Meutsch			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011	
Mailing Address 2023 Royal Pines Dr			Amount of Each Disbursement this Period 387.50	
City New Bern	State NC	Zip Code 28560	Transaction ID : SB17-CN22	
Purpose of Disbursement IN-KIND RECEIVED music and video services		Category/Type	In-Kind Received music and video services	
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) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Frank Palombo			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2011	
Mailing Address 1502 Tryon Rd			Amount of Each Disbursement this Period 100.00	
City New Bern	State NC	Zip Code 28560	Transaction ID : SB17-CN27	
Purpose of Disbursement IN-KIND RECEIVED Photography services		Category/Type	In-Kind Received Photography services	
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) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	887.50
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 18 OF 19			
	<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)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Frank Palombo		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2011
Mailing Address 1502 Tryon Rd		Amount of Each Disbursement this Period 712.06
City New Bern	State NC	
Zip Code 28560	Purpose of Disbursement IN-KIND RECEIVED Palm Cards	Transaction ID : SB17-CN28
Candidate Name	Category/Type	
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) Primary 2012	In-Kind Received Palm Cards
State: District:		

Full Name (Last, First, Middle Initial) B. Frank Palombo		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011
Mailing Address 1502 Tryon Rd		Amount of Each Disbursement this Period 107.33
City New Bern	State NC	
Zip Code 28560	Purpose of Disbursement IN-KIND RECEIVED Dare M&G Food	Transaction ID : SB17-CN29
Candidate Name	Category/Type	
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) Primary 2012	In-Kind Received Dare M&G Food
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	819.39
TOTAL This Period (last page this line number only).....	5931.89

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)

Palombo for Congress Committe

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Trail Blazer Campaign Services Inc.

Mailing Address 620 Mendelssohn Avenue N
Suite 186

City State Zip Code
Minneapolis MN 55427

Nature of Debt (Purpose):
Invoice: Campaign software Administrativ

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV6**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

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

Mailing Address 12600 Whitewater Drive
Suite 200

City State Zip Code
Minnetonka MN 55343

Nature of Debt (Purpose):
Invoice: merchant services Administrativ

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV5**

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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)	<input type="text" value="2380.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="2380.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2380.00"/>