FEC FORM 3	AND DI	FOFRE SBURSE Authorized Con	MENTS		Of	fice Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN		xample: If typin ver the lines.	g, type	12FE4M5	
	DR CONGRESS					
ADDRESS (number and str	reet)	i6 				
Check if differen	nt					
than previously reported. (ACC)		M			AL 352	36
2. FEC IDENTIFICATI	ON NUMBER 🔻	CITY			STATE	ZIP CODE ▲ STATE ▼ DISTRICT
C C00508382		3. IS THIS REPORT	NEW (N)	OR	AMENDED (A)	
July 15 Qua October 15 January 31		Election or	ST-Election Rep General (30G) 12C) Doort for the:	General (12G Special (12S) Y Y Y Y Runoff (30R) Y Y Y Y	
5. Covering Period	M M / D D 04 01	/ Y Y Y Y 2012	through	M M 06	/ D D / Y 30	Y Y Y 2012
I certify that I have exam		-	nowledge and	belief it is tr	rue, correct and co	omplete.
Type or Print Name of Tr Signature of Treasurer	Phillip Dwigh	t Norris	[Electronically]	Filed] [Date	D D / Y Y Y Y 15 / 2012
NOTE: Submission of false Office	e, erroneous, or incompl	ete information may	subject the per	son signing	this Report to the I	penalties of 2 U.S.C. §437g.
Use Only						FEC FORM 3 (Revised 02/2003)

PAGE 1 / 14

SUMMARY PAGE of Receipts and Disbursements

 	FEC Form 3 (Revised 02/2003)	of Receipts and Disbursements	PAGE 2 / 14
	Vrite or Type Committee Name PHIL NORRIS FOR CONGRESS		
R	Report Covering the Period: From: 04	M / D D / Y Y Y Y 01 2012	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))	0.00	410.00
	(b) Total Contribution Refunds (from Line 20(d))	1.41	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	-1.41	410.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	2201.16
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	2201.16
8.	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5556.05	

For further information contact:

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

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

Image# 12971465525		
Г (DETAILED SUMMARY PAGE	_
FEC Form 3 (Revised 12/2003)	of Receipts	PAGE 3 / 14
Write or Type Committee Name		
PHIL NORRIS FOR CONGRESS		
	M / D D / Y Y Y Y 01 / 2012 To:	M M / D D / Y
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)	0.00	250.00
(ii) Unitemized	0.00	160.00
(iii) TOTAL of contributions	0.00	
from individuals		410.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(other than loans)		
(add Lines 11(a)(iii), (b), (c), and (d))	0.00	410.00
12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the	0.00	1758.00
Candidate		
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	1758.00
		7 7 7
14. OFFSETS TO OPERATING EXPENDITURES		
(Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS		
(Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines		
11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	2168.00

FE5AN018

of Disbursements PAGE 4 / 14 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 2201.16 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 1.41 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 1.41 0.00 (add Lines 20(a), (b), and (c))..... 105.43 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 106.84 2201.16 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 84

DETAILED SUMMARY PAGE

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD			7		7		106.84
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	l		7		7	-	0.00
25.	SUBTOTAL (add Line 23 and Line 24)	l		,		7	-	106.84
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	l		7		7	-	106.84
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			7		7	-	0.00

age# 12971465527					
HEDULE C (FEC Form 3) ANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 14 FOR LINE NUMBER: (check only one)		
ME OF COMMITTEE (In Full) HIL NORRIS FOR CONGRESS		Transaction ID : SC/10.4128			
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	iddle Initial)		lection: 2012 Primary		
Mailing Address 373 Heritage Drive			General Other (specify) ▼		
City	State ZIP Co	ode			
Hoover	AL 35216				
Original Amount of Loan	Cumulative Payment To	Date Balance	e Outstanding at Close of This Period		
3480.00	9	0.00	3480.00		
TERMS Date Incurred	Date Due	Interest Rate	Secured:		
M 12 ^M / D 21 ^D / Y 2011 Y	M M / D D / Y	none Y 0.00	₩ (apr) × Yes No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
JBTOTALS This Period This Page (optional)		· · · · · · · · · · · · · · · · · · ·	3480.00		
DTALS This Period (last page in this line on			d to appropriate line of Summary.		

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 OF 14 FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRESS		Transactio	n ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	iddle Initial)	E	Election: 2012 Primary General
Mailing Address 373 Heritage Drive			Other (specify)
City	State ZIP Coc	le	
Hoover	AL 35216		
Original Amount of Loan 38.05	Cumulative Payment To	Date Balance	e Outstanding at Close of This Period 38.05
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 23 / Y 2011		v v v v v 0.00	% (apr) Ves No
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 1
SUBTOTALS This Period This Page (optional))	• • •	38.05
TOTALS This Period (last page in this line on Carry outstanding balance only to LINE 3, So			· · · · · · · · · · · · · · · · · · ·

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRESS			Transaction ID : SC/10.4129
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	liddle Initial)		Election: 2012 Primary General
Mailing Address 373 Heritage Drive			Other (specify)
City	State	ZIP Code	
Hoover	AL	35216	
Original Amount of Loan	Cumulative Pa	yment To Da	ate Balance Outstanding at Close of This Peri 0.00 100.00
TERMS Date Incurred	Γ	Date Due	Interest Rate Secured:
	M M / D D	/ Y Y	one Y 0.00 % (apr) Yes N
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)			lame of Employer
Mailing Address			Decupation
City State	ZIP Code	G	amount Guaranteed Dutstanding:
2. Full Name (Last, First, Middle Initial)		N	lame of Employer
Mailing Address		C	Occupation
City State	ZIP Code	G	Amount Guaranteed Dutstanding:
3. Full Name (Last, First, Middle Initial)		N	lame of Employer
Mailing Address		C	Decupation
City State	ZIP Code	G	mount Guaranteed Dutstanding:
4. Full Name (Last, First, Middle Initial)		N	lame of Employer
Mailing Address		C	Decupation
City State	ZIP Code	G	Guaranteed Dutstanding:
UBTOTALS This Period This Page (optional)	·		
OTALS This Period (last page in this line or Carry outstanding balance only to LINE 3. So			Schedule D, carry forward to appropriate line of Summary

DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRESS	3	Transaction ID : SC/10.4131
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	Aiddle Initial)	Election: 2012 Primary General
Mailing Address 373 Heritage Drive		Other (specify) ▼
City	State ZIP C	ode
Hoover	AL 35216	6
Original Amount of Loan 45.00	Cumulative Payment T	o Date Balance Outstanding at Close of This Period 0.00 45.00
TERMS Date Incurred M12 / 27 / ¥ 2011 ¥ List All Endorsers or Guarantors (if any	Date Due	e Interest Rate Secured:
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (optiona OTALS This Period (last page in this line o		

age# 12971465531			PAGE 9 OF 14		
HEDULE C (FEC Form 3) ANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 13a 13b		
ME OF COMMITTEE (In Full) HIL NORRIS FOR CONGRESS		Transaction ID : SC/10.4132			
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	Iiddle Initial)		lection: 2012 Primary General		
Mailing Address 373 Heritage Drive			Other (specify)		
City	State ZIP Co	ode			
Hoover	AL 35216				
Original Amount of Loan	Cumulative Payment To	Date Balance	e Outstanding at Close of This Perio		
35.00		0.00	35.00		
TERMS Date Incurred	Date Due	Interest Rate	Secured:		
M 12 ^M / D 29 ^D / Y Ž011 Y	M M / D D / Y	none 0.00	₩ (apr) ^{Yes} No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · ·		
JBTOTALS This Period This Page (optiona DTALS This Period (last page in this line of	·		7 7 35.00 7 7 7		

CHEDULE C (OANS	FEC Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE PHIL NORRIS F	(In Full) OR CONGRESS		Transaction ID : SC/10.4099
LOAN SOURCE F Phillip Dwight	ull Name (Last, First, Mic Norris	ddle Initial)	Election: 2012 Primary General
Mailing Address 373 Heritage Drive			Other (specify) ▼
City Hoover		StateZIP CoAL35216	de
Original Amount of	f Loan 150.00	Cumulative Payment To	Date Balance Outstanding at Close of This Period 0.00 150.00
M 02 ^M / D 03 ^D	e Incurred / ¥ Ž01Ž ¥ or Guarantors (if any) t	Date Due	Interest Rate Secured:
	, First, Middle Initial)		Name of Employer Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, Mailing Address	First, Middle Initial)		Name of Employer Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last,	First, Middle Initial)		Name of Employer
Mailing Address			Occupation Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last,	First, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
TOTALS This Period (last page in this line only	y)	

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HEDULE C (FE ANS	C Form 3)			Use separate schedu for each category of Detailed Summary P	the	PAGE 11 OF 14 FOR LINE NUMBER: (check only one) X 13a 13b
AME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRESS				Trans	action I	D : SC/10.4109
LOAN SOURCE Full N Phillip Dwight Nor	•	ddle Initial)				rtion: 2012 Primary
Mailing Address 373 Heritage Drive						General Other (specify) ▼
City		State	ZIP Code)		
Hoover		AL	35216			
Original Amount of Loa	ın	Cumulative Pa	ayment To D	ate Ba	alance C	Dutstanding at Close of This Peri
,	150.00	,		0.00		150.00
TERMS Date Inc	urred	[Date Due	Interest Ra	ate	Secured:
M 02 / 14 /	Ý Ž01Ž Ý	M M / D C		none 0.	00	% (apr)
List All Endorsers or G	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
3. Full Name (Last, Firs	t, Middle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
IBTOTALS This Period						150.00

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRESS		Transaction ID : SC/10.4114
LOAN SOURCE Full Name (Last, First, M Phillip Dwight Norris	liddle Initial)	Election: 2012 Primary General
Mailing Address 373 Heritage Drive		Other (specify)
City Hoover	State ZIP AL 352	Code 216
Original Amount of Loan 600.00	Cumulative Paymen	t To Date Balance Outstanding at Close of This Per
TERMS Date Incurred M02 ^M / P24 ^D / Y Ž01Ž Y		Due Interest Rate Secured:
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	nly)	

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HEDULE C (FEC ANS	C Form 3)			Use separate sch for each category Detailed Summary	of the	PAGE 13 OF 14 FOR LINE NUMBER: (check only one)
ME OF COMMITTEE (In	,		·	Tra	nsaction I	D : SC/10.4149
LOAN SOURCE Full Na Phillip Dwight Nor	•	Idle Initial)			Elec	ction: 2012 Primary
Mailing Address 373 Heritage Drive						General Other (specify)
City		State	ZIP Code			
Hoover		AL	35216			
Original Amount of Loa	n	Cumulative Pay	ment To Date	e	Balance C	Outstanding at Close of This Peri
<u>,</u>	858.00			0.00		858.00
TERMS Date Incu	urred	Da	ate Due	Interest	Rate	Secured:
M 03 / D 09 /	Y Ž01Ž Y	M M / D D	/ Y Y	Y Y IE	0.00	₩ (apr)
List All Endorsers or G		o Loan Source				
1. Full Name (Last, First	st, Middle Initial)		Na	me of Employer		
Mailing Address			Oc	cupation		
City	State	ZIP Code	Gu	aranteed tstanding:	7	
2. Full Name (Last, First	, Middle Initial)		Na	me of Employer		
Mailing Address			Oc	cupation		
City	State	ZIP Code	Gu	nount aranteed tstanding:	7	
3. Full Name (Last, First	, Middle Initial)		Na	me of Employer		
Mailing Address			Oc	cupation		
City	State	ZIP Code	Gu	aranteed tstanding:	7	· · · · · · · · ·
4. Full Name (Last, First	, Middle Initial)		Na	me of Employer		
Mailing Address			Oc	cupation		
City	State	ZIP Code	Gu	nount aranteed tstanding:	7	· · · · · · · · ·
IBTOTALS This Period T DTALS This Period (last p						858.00

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) PHIL NORRIS FOR CONGRES	SS	Transaction ID : SC/10.4152		
LOAN SOURCE Full Name (Last, First Phillip Dwight Norris	i, Middle Initial)	Election: 2012 Primary General		
Mailing Address 373 Heritage Drive		Other (specify)		
City Hoover	State ZIP C AL 35216			
Original Amount of Loan	Cumulative Payment To	Date Balance Outstanding at Close of This Per 0.00 100.00		
TERMS Date Incurred M 03 / P 16 / Y 2012 List All Endorsers or Guarantors (if a	Date Due	e Interest Rate Secured: none 0.00 % (apr) Yes		
1. Full Name (Last, First, Middle Initia	• •	Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page (optic	· · · · · · · · · · · · · · · · · · ·			