

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

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="2016"/>		35880.21
(b) Cash on Hand at Beginning of Reporting Period.....	38816.74	
(c) Total Receipts (from Line 19)	4000.88	59767.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	42817.62	95647.79
7. Total Disbursements (from Line 31).....	183.18	53013.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	42634.44	42634.44
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	670.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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. 05/2016)

Page 3

Write or Type Committee Name

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2016 To: M M / D D / Y Y Y Y 09 / 30 / 2016

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).....	3880.00	30705.00
(ii) Unitemized	120.00	28460.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	4000.00	59165.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	600.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4000.00	59765.00
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.).....	0.88	2.58
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)).....▶	4000.88	59767.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4000.88	59767.58

DETAILED SUMMARY PAGE
of Disbursements

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	183.18	3008.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	183.18	3008.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	205.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	49800.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	183.18	53013.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	183.18	53013.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4000.00	59765.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000.00	59765.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	183.18	3008.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	183.18	3008.35

**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 6 OF 13
	<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"/> 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)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. BROWN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3136 SUSSEX ROAD

City RALEIGH	State NC	Zip Code 27607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RBPR INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11AI.16284

Amount of Each Receipt this Period
500.00

Memo Item
GOLF FEES

B. BROWN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3136 SUSSEX ROAD

City RALEIGH	State NC	Zip Code 27607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RBPR INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11AI.16285

Amount of Each Receipt this Period
40.00

Memo Item
MULLIGANS/RED TEES

C. JACKSON, RONNIE, V, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 INVERNESS RD

City CLINTON	State NC	Zip Code 28328
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLINTON TRUCK & TRACTOR CO. INC.	Occupation (for Individual) PRESIDENT/OWNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11AI.16280

Amount of Each Receipt this Period
80.00

Memo Item
CLOSEST TO THE PIN SHOT

SUBTOTAL of Receipts This Page (optional).....	620.00
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 13
	<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)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. JACKSON, RONNIE, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 INVERNESS RD
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLINTON TRUCK & TRACTOR CO. INC. Occupation (for Individual) PRESIDENT/OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1080.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11AI.16281
 Amount of Each Receipt this Period **500.00**
 Memo Item
GOLF FEES

B. JACKSON, RONNIE, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 INVERNESS RD
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLINTON TRUCK & TRACTOR CO. INC. Occupation (for Individual) PRESIDENT/OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1120.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11AI.16282
 Amount of Each Receipt this Period **40.00**
 Memo Item
MULLIGANS/RED TEES

C. LOVE, DAVID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 CEDARCREEK DRIVE
 City STATE ROAD State NC Zip Code 28676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHARMGATE ANIMAL HEALTH Occupation (for Individual) SENIOR ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11AI.16286
 Amount of Each Receipt this Period **500.00**
 Memo Item
GOLF FEES

SUBTOTAL of Receipts This Page (optional).....	1040.00
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 8 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. LOVE, DAVID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 CEDARCREEK DRIVE
 City STATE ROAD State NC Zip Code 28676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHARMGATE ANIMAL HEALTH Occupation (for Individual) SENIOR ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11AI.16287
 Amount of Each Receipt this Period 20.00
 Memo Item
 MULLIGANS/RED TEES

B. PARKER, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 GORDON ROAD
 City CLAYTON State NC Zip Code 27520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUVEPHARMA Occupation (for Individual) SENIOR ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11AI.16288
 Amount of Each Receipt this Period 500.00
 Memo Item
 GOLF FEES

C. PARKER, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 GORDON ROAD
 City CLAYTON State NC Zip Code 27520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUVEPHARMA Occupation (for Individual) SENIOR ACCOUNT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1640.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11AI.16289
 Amount of Each Receipt this Period 40.00
 Memo Item
 MULLIGANS/RED TEES

SUBTOTAL of Receipts This Page (optional).....	560.00
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 9 OF 13
<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)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. POPE, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 DEER TRACK TRAIL
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC COMPANY Occupation (for Individual) REGIONAL SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11AI.16290
 Amount of Each Receipt this Period 80.00
 Memo Item
 CLOSEST TO THE PIN SHOT

B. POPE, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 DEER TRACK TRAIL
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC COMPANY Occupation (for Individual) REGIONAL SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1180.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11AI.16291
 Amount of Each Receipt this Period 500.00
 Memo Item
 GOLF FEES

C. POPE, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 DEER TRACK TRAIL
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC COMPANY Occupation (for Individual) REGIONAL SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1220.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11AI.16292
 Amount of Each Receipt this Period 40.00
 Memo Item
 MULLIGANS/RED TEES

SUBTOTAL of Receipts This Page (optional).....	620.00
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 13
	<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"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. ROWE, MARCUS, TODD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 DIXIE CIRCLE
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QC SUPPLY LLC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11AI.16294
 Amount of Each Receipt this Period 500.00
 Memo Item
 GOLF FEES

B. ROWE, MARCUS, TODD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 DIXIE CIRCLE
 City CLINTON State NC Zip Code 28328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QC SUPPLY LLC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11AI.16295
 Amount of Each Receipt this Period 40.00
 Memo Item
 MULLIGANS/RED TEES

C. STRICKLAND, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3185 WILSONS MILL RD
 City SMITHFIELD State NC Zip Code 27577-7648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGCAROLINA FARM CREDIT Occupation (for Individual) SR. VP OF MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11AI.16293
 Amount of Each Receipt this Period 500.00
 Memo Item
 GOLF FEES

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
TOTAL This Period (last page this line number only).....▶	3880.00

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. EXPRESS MERCHANT PROCESSING SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 660

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement CREDIT CARD FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.16298

Amount of Each Disbursement this Period: 171.18

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	171.18
TOTAL This Period (last page this line number only).....▶	171.18

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 13
	FOR LINE NUMBER: (check only one)
	<input checked="" type="checkbox"/> 9
	<input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAIER, ANGIE, , ,			Nature of Debt (Purpose): AUCTION
Mailing Address 1324 RODESSA RUN			
City RALEIGH	State NC	Zip Code 27607	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>	Transaction ID : SD9.15718	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEESE, THOMAS, , , JR.			Nature of Debt (Purpose): RAFFLE TICKET
Mailing Address 1003 PEBBLE DRIVE			
City GREENSBORO	State NC	Zip Code 27410	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>	Transaction ID : SD9.15543	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="100.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SPELL, ERIC, , ,			Nature of Debt (Purpose): GOLF FEES
Mailing Address 102 FOX HOLLOW DR			
City CLINTON	State NC	Zip Code 28328	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	Transaction ID : SD9.14377	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="550.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 13
	FOR LINE NUMBER: (check only one)
<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SPELL, ERIC, , ,			Nature of Debt (Purpose): MULLIGANS/RED TEES
Mailing Address 102 FOX HOLLOW DR			
City CLINTON	State NC	Zip Code 28328	

Outstanding Balance Beginning This Period	Transaction ID : SD9.14378	
<input type="text" value="40.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="40.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SPELL, ERIC, , ,			Nature of Debt (Purpose): CLOSEST TO THE PIN SHOT
Mailing Address 102 FOX HOLLOW DR			
City CLINTON	State NC	Zip Code 28328	

Outstanding Balance Beginning This Period	Transaction ID : SD9.14379	
<input type="text" value="80.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="80.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="120.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="670.00"/>
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="670.00"/>