

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Palombo for Congress Committee

ADDRESS (number and street) P. O. Box 12862
 Check if different than previously reported. (ACC) New Bern NC 28561

2. **FEC IDENTIFICATION NUMBER** C C00501635 3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
NC 03

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 05 / 08 / 2012 in the State of NC
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 05 / 08 / 2012 in the State of NC

5. Covering Period 04 / 01 / 2012 through 04 / 18 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Lisa Marie Marley
Signature of Treasurer Lisa Marie Marley [Electronically Filed] Date 04 / 22 / 2012

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

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))....	2669.12	63193.14
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2669.12	63193.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8553.75	56924.42
(b) Total Offsets to Operating Expenditures (from Line 14).....		250
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8553.75	56674.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6128.97	
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).....		

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)

Write or Type Committee Name

Palombo for Congress Committee

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).....	850	32841.53
(ii) Unitemized.....	1599.48	18622.58
(iii) TOTAL of contributions from individuals ▶	2449.48	51464.11
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		5500
(d) The Candidate.....	219.64	6229.03
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2669.12	63193.14
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.)		250
15. OTHER RECEIPTS (Dividends, Interest, etc.)25
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2669.12	63443.39

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8553.75	56924.42
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		390
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	8553.75	57314.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12013.6
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2669.12
25. SUBTOTAL (add Line 23 and Line 24).....	14682.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8553.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6128.97

**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 17
	<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	

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

A. Full Name (Last, First, Middle Initial)
Jennifer Joyner Dacey

Mailing Address 139 Trent Shores Dr

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Ward & Smith 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
04 / 03 / 2012

Transaction ID : SA11Ai-CN377

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Joseph Francis Murphy

Mailing Address 220 W Villa Dunes Dr

City State Zip Code
Nags Head NC 27959

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

Name of Employer Occupation
Self Employed/Safety Matters LLC Consultant/Safety Matters LLC

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
04 / 03 / 2012

Transaction ID : SA11Ai-CN374

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Patrick Arthur Patterson

Mailing Address 143 W Holly Trl

City State Zip Code
Kitty Hawk NC 27949

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
04 / 05 / 2012

Transaction ID : SA11Ai-CN376

Amount of Each Receipt this Period
100

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

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

600.00

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

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

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

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial)
Jack C Trabucco

Mailing Address 3714 Butler Rd

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
Tidewater Air Services Manager

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
04 / 12 / 2012

Transaction ID : SA11Ai-CN396

Amount of Each Receipt this Period
250

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

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 7 OF 17
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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)
Frank Palombo

Mailing Address 1502 Tryon Rd

City State Zip Code
New Bern NC 28560

FEC ID number of contributing federal political committee. **C H2NC03079**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6229.03

Date of Receipt
 M M / D D / Y Y Y Y
04 15 2012

Transaction ID : SA11D-CN402

Amount of Each Receipt this Period
219.64

In-Kind Received

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

219.64

219.64

**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 8 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 14.20
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Trans processing		Category/ Type 001	Transaction ID : SB17-EX137
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		Trans processing
State: District:			

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 4.50
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Trans processing		Category/ Type 001	Transaction ID : SB17-EX158
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		Trans processing
State: District:			

Full Name (Last, First, Middle Initial) C. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 5.95
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Trans processing		Category/ Type 001	Transaction ID : SB17-EX142
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		Trans processing
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	24.65
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 9 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 10.53
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Trans processing	Transaction ID : SB17-EX143
Candidate Name	Category/Type 001	
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	Trans processing
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement trans processing	Transaction ID : SB17-EX153
Candidate Name	Category/Type 001	
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	trans processing
State: District:		

Full Name (Last, First, Middle Initial) C. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 2.56
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Trans Processing	Transaction ID : SB17-EX159
Candidate Name	Category/Type 001	
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	Trans Processing
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16.29
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 10 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Trans Processing	
Candidate Name		Transaction ID : SB17-EX160
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:	Category/Type 001	Trans Processing

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 2.47
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Trans Processing	
Candidate Name		Transaction ID : SB17-EX161
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:	Category/Type 001	Trans Processing

Full Name (Last, First, Middle Initial) C. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 4.34
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement	
Candidate Name		Transaction ID : SB17-EX164
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:	Category/Type 001	Administrative/Salary/Overhead Expenses

SUBTOTAL of Disbursements This Page (optional).....	10.01
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 11 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Palombo for Congress Committee

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012	
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 5.95	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX163	
Purpose of Disbursement		Category/ Type 001	Administrative/Salary/Overhead Expenses	
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. Ingrid Johansen			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012	
Mailing Address 1001 Victoria Way			Amount of Each Disbursement this Period 1250.00	
City Trent Woods	State NC	Zip Code 28562	Transaction ID : SB17-EX148	
Purpose of Disbursement consulting		Category/ Type 001	consulting	
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. Ingrid Johansen			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012	
Mailing Address 1001 Victoria Way			Amount of Each Disbursement this Period 1250.00	
City Trent Woods	State NC	Zip Code 28562	Transaction ID : SB17-EX165	
Purpose of Disbursement consulting		Category/ Type 001	consulting	
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).....	2505.95
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 12 OF 17			
	<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. Ted Brown		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 111 West Market Street		Amount of Each Disbursement this Period 2500.00
City Elkin	State NC	
Zip Code 28621	Purpose of Disbursement consulting	Transaction ID : SB17-EX155
Candidate Name	Category/ Type 001	
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	consulting
State: District:		

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 117 North Saint Street		Amount of Each Disbursement this Period 98.32
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement	Transaction ID : SB17-EX162
Candidate Name	Category/ Type 004	
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	Advertising Expenses
State: District:		

Full Name (Last, First, Middle Initial) C. PrintElect		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 3731 Trent Road		Amount of Each Disbursement this Period 1521.19
City New Bern	State NC	
Zip Code 28562	Purpose of Disbursement signs	Transaction ID : SB17-EX154
Candidate Name	Category/ Type 004	
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	signs
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4119.51
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 13 OF 17	
	<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 Fulcher		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 145 Quarterdeck Townes		Amount of Each Disbursement this Period 554.40
City New Bern	State NC	
Zip Code 28562	Purpose of Disbursement travel	Transaction ID : SB17-EX151
Candidate Name	Category/ Type 001	
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	travel
State: District:		

Full Name (Last, First, Middle Initial) B. Frank Fulcher		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 145 Quarterdeck Townes		Amount of Each Disbursement this Period 275.55
City New Bern	State NC	
Zip Code 28562	Purpose of Disbursement travel	Transaction ID : SB17-EX152
Candidate Name	Category/ Type 001	
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	travel
State: District:		

Full Name (Last, First, Middle Initial) C. Frank Fulcher		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 145 Quarterdeck Townes		Amount of Each Disbursement this Period 228.80
City New Bern	State NC	
Zip Code 28562	Purpose of Disbursement travel reimbursement	Transaction ID : SB17-EX166
Candidate Name	Category/ Type 001	
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	travel reimbursement
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1058.75
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 14 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. Theas Ideas		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P. O. Box A		Amount of Each Disbursement this Period 296.54
City New Bern	State NC	
Zip Code 28563	Purpose of Disbursement stickers	Transaction ID : SB17-EX149
Candidate Name	Category/Type 004	
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	stickers
State: District:		

Full Name (Last, First, Middle Initial) B. Frank Palombo		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012
Mailing Address 1502 Tryon Rd		Amount of Each Disbursement this Period 219.64
City New Bern	State NC	
Zip Code 28560	Purpose of Disbursement IN-KIND RECEIVED	Transaction ID : SB17-CN402
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
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	Category/Type
Candidate Name		
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).....	516.18
TOTAL This Period (last page this line number only).....	8251.34

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Theas Ideas

Mailing Address P. O. Box A

City State Zip Code
New Bern NC 28563

Nature of Debt (Purpose):
Invoice: stickers

Outstanding Balance Beginning This Period 296.54	Transaction ID : SD10-INV146	
Amount Incurred This Period .00	Payment This Period 296.54	Outstanding Balance at Close of This Period .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lisa Marley

Mailing Address 101 Elizabeth Court

City State Zip Code
Kill Devil Hills NC 27948

Nature of Debt (Purpose):
Invoice: website and postage

Outstanding Balance Beginning This Period 82.65	Transaction ID : SD10-INV144	
Amount Incurred This Period .00	Payment This Period 82.65	Outstanding Balance at Close of This Period .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Frank Fulcher

Mailing Address 145 Quarterdeck Townes

City State Zip Code
New Bern NC 28562

Nature of Debt (Purpose):
Invoice: travel

Outstanding Balance Beginning This Period 554.40	Transaction ID : SD10-INV140	
Amount Incurred This Period .00	Payment This Period 554.40	Outstanding Balance at Close of This Period .00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

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 Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PrintElect

Mailing Address 3731 Trent Road

City State Zip Code
New Bern NC 28562

Nature of Debt (Purpose):
Invoice: signs

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV149**
1521.19

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 1521.19 .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Frank Fulcher

Mailing Address 145 Quarterdeck Townes

City State Zip Code
New Bern NC 28562

Nature of Debt (Purpose):
Invoice: travel

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV139**
275.55

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 275.55 .00

C. 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: Trans processing

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV131**
14.20

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 14.20 .00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Palombo for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Catherine New		Nature of Debt (Purpose): Invoice: postage and office supplies Q1
Mailing Address 1511 Fairfax Lane		
City State	Zip Code	
New Bern	NC 28561	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV147	
<input type="text" value="120.28"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="120.28"/>	<input type="text" value=".00"/>

B. 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"/>

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="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
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="0.00"/>