

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

ADDRESS (number and street) 115 Apollo Dr.  
 Check if different than previously reported. (ACC)  
Cape Carteret NC 28584

2. **FEC IDENTIFICATION NUMBER** C00250589  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of NC

5. Covering Period 10 01 2010 through 11 22 2010

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 Steve Malay  
Signature of Treasurer Electronically Filed by Steve Malay Date 11 23 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		8762.27
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	9033.33									
(c) Total Receipts (from Line 19) .....	564.00	14912.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9597.33	23674.61								
7. Total Disbursements (from Line 31) .....	8537.20	22614.48								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1060.13	1060.13								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	169.00	1201.00
(ii) Unitemized .....	395.00	11409.34
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	564.00	12610.34
(b) Political Party Committees .....	0.00	2002.00
(c) Other Political Committees (such as PACs) .....	0.00	300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	564.00	14912.34
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (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)) .....	564.00	14912.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	564.00	14912.34

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	8537.20	22614.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8537.20	22614.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	8537.20	22614.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8537.20	22614.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	564.00	14912.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	564.00	14912.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8537.20	22614.48
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8537.20	22614.48

**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 / 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	

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)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b>	Full Name (Last, First, Middle Initial) George Cleveland	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 224 Campbell Place	<b>Transaction ID:</b> SA11AI.8363
	City State Zip Code Jacksonville NC 28546	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer State of NC	Occupation Rep. in NC House	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Virginia Cooper	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 2617 Church St.	<b>Transaction ID:</b> SA11AI.8342
	City State Zip Code Winterville NC 28590	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Virginia Cooper	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 2617 Church St.	<b>Transaction ID:</b> SA11AI.8364
	City State Zip Code Winterville NC 28590	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 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)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b>	Full Name (Last, First, Middle Initial) Kim Hendrix	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 1830 Blue Banks Farm Rd	<b>Transaction ID:</b> SA11AI.8345
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer Productions by Kim	Occupation event planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bob Pruett	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address PO Box 695	<b>Transaction ID:</b> SA11AI.8350
	City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer Pruett Rentals	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bob Pruett	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address PO Box 695	<b>Transaction ID:</b> SA11AI.8375
	City State Zip Code Beaufort NC 28516	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	pass the hat donation
Name of Employer Pruett Rentals	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 740.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	25.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 13  
(check only one)

<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)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

**A.**

Full Name (Last, First, Middle Initial)  
Ann Sullivan

Mailing Address 103 Wildwood Dr.

City State Zip Code  
Goldsboro NC 27530

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2010

**Transaction ID:** SA11AI.8351

Amount of Each Receipt this Period  
5.00

pass the hat donation

**B.**

Full Name (Last, First, Middle Initial)  
Ann Sullivan

Mailing Address 103 Wildwood Dr.

City State Zip Code  
Goldsboro NC 27530

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2010

**Transaction ID:** SA11AI.8376

Amount of Each Receipt this Period  
4.00

pass the hat donation

**C.**

Full Name (Last, First, Middle Initial)  
Ceil Wasserman

Mailing Address 305 Augusta Ct.

City State Zip Code  
New Bern NC 28562

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2010

**Transaction ID:** SA11AI.8379

Amount of Each Receipt this Period  
5.00

pass the hat donation

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>14.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>169.00</b>

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b>	Full Name (Last, First, Middle Initial) Bob Steinburg for NC House  Mailing Address 103 S. Granville  City Edenton State NC Zip Code 27932  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8321 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 477.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Citizens to Elect Jean Preston  Mailing Address PO Box 5107  City Emerald Isle State NC Zip Code 28594  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8318 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 1077.50
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Bill Cook  Mailing Address 75 Cape Fear Dr.  City Chocowinity State NC Zip Code 27817  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8316 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 627.50

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2182.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<p><b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Jeff Collins</p> <p>Mailing Address 1109 Culpepper Dr.</p> <p>City Rocky Mount State NC Zip Code 27803</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8329</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 352.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Norman Sanderson NC House</p> <p>Mailing Address 269 Bennett Rd.</p> <p>City Arapahoe State NC Zip Code 28510</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8322</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 627.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Pat McElrath</p> <p>Mailing Address PO Box 5195</p> <p>City Emerald Isle State NC Zip Code 28594</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8327</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 627.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1607.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<p><b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Stephen LaRoque</p> <p>Mailing Address PO Box 1034</p> <p>City Kinston State NC Zip Code 28503</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8324</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 477.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Efton Sager Campaign</p> <p>Mailing Address 401 Southwood Dr.</p> <p>City Goldsboro State NC Zip Code 27530</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8325</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 502.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hood Richardson for NC Senate Committee</p> <p>Mailing Address 110 W. 2nd St.</p> <p>City Washington State NC Zip Code 27889</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Hood Richardson for NC Senate Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8317</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 527.50</p>

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

1507.50

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

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b>	Full Name (Last, First, Middle Initial) Louis Pate Election Committee  Mailing Address PO Box 945  City Mt. Olive State NC Zip Code 28365  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8319 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 777.50  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Mark W. Griffin for NC House District 12  Mailing Address 465 Daugherty Rd.  City Dover State NC Zip Code 28526  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8326 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 529.50  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Phil Shepard Committee for NC House  Mailing Address 111 Vernon Shepard La.  City Jacksonville State NC Zip Code 28540  Purpose of Disbursement campaign contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8328 Date of Disbursement 10 / 02 / 2010  Amount of Each Disbursement this Period 677.50  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1984.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

PAGE 13 / 13

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

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NAME OF COMMITTEE (In Full)  
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Stan Larson Campaign Committee <hr/> Mailing Address 3126 Cleere Ct. <hr/> City Greenville State NC Zip Code 27858 <hr/> Purpose of Disbursement campaign contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.8323 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 627.50
<b>B.</b> Full Name (Last, First, Middle Initial) Woodard for NC House District 1 <hr/> Mailing Address 117 Pelican Point Dr. <hr/> City Elizabeth City State NC Zip Code 27909 <hr/> Purpose of Disbursement campaign contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.8320 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 627.50

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

1255.00

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

8537.00