

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Meadows for Congress

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))....	103531.81	326142.23
(b) Total Contribution Refunds (from Line 20(d))	0.00	5250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	103531.81	320892.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40751.93	190259.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	44.00	44.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40707.93	190215.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	265439.72	
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).....	160500.00	

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

Meadows for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 2015

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).....	87034.38	144904.38
(ii) Unitemized.....	9497.43	81810.77
(iii) TOTAL of contributions from individuals ▶	96531.81	226715.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	99427.08
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	103531.81	326142.23
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	44.00	44.00
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)..... ▶	103575.81	326186.23

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40751.93	190259.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	12000.00	56000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	12000.00	56000.00
20. 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	5250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5250.00
21. OTHER DISBURSEMENTS	-16950.00	11428.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35801.93	262938.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	197665.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	103575.81
25. SUBTOTAL (add Line 23 and Line 24).....	301241.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35801.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	265439.72

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Raanan Agus

Mailing Address 200 West Street

City State Zip Code
New York NY 10282

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

Name of Employer Occupation
Goldman-Sachs Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20396

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Gila Alpert

Mailing Address 184 Dwight Pl

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20570

Amount of Each Receipt this Period
1000.00

Earmarked through NORPAC

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City State Zip Code
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3960.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20570.0

Amount of Each Receipt this Period
1000.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

2500.00

**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 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Robert Arnott

Mailing Address 620 Newport Center Dr Ste 9000

City Newport Beach State CA Zip Code 92660-8038

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

Name of Employer Research Affiliates Occupation CEO / Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.21013

Amount of Each Receipt this Period
 5400.00

Earmarked through HOUSE FREEDOM FUND

B. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.21013.0

Amount of Each Receipt this Period
 5400.00

Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

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

Mailing Address 620 Newport Center Dr Ste 9000

City Newport Beach State CA Zip Code 92660-8038

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

Name of Employer Research Affiliates Occupation CEO / Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.21190

Amount of Each Receipt this Period
 -2700.00

Redesignated to General
[MEMO ITEM]

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Robert Arnott

Mailing Address 620 Newport Center Dr Ste 9000

City Newport Beach	State CA	Zip Code 92660-8038
-----------------------	-------------	------------------------

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

Name of Employer Research Affiliates	Occupation CEO / Chairman
---	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		23		2015

Transaction ID : SA11AI.21191

Amount of Each Receipt this Period

2700.00

Redesignated From Primary

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Charles G. Beemer

Mailing Address 13 Greenview Drive

City Waynesville	State NC	Zip Code 28786
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		01		2015

Transaction ID : SA11AI.20410

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Richard D Bernier

Mailing Address PO Box 265

City Weaverville	State NC	Zip Code 28787
---------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2015

Transaction ID : SA11AI.20335

Amount of Each Receipt this Period

1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Joel Bertet

Mailing Address 400 N. Croft Avenue

City Los Angeles State CA Zip Code 90048

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

Name of Employer Maison Bertet Occupation Interior Designer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20400

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Yehuda Blinder

Mailing Address 95 Dwight Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer Finance Occupation ADAR Investment Management

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20574

Amount of Each Receipt this Period
 500.00

Earmarked through NORPAC

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20574.0

Amount of Each Receipt this Period
 500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Charles Blunt

Mailing Address 208 Caroline Lane

City State Zip Code
Pisgah Forest NC 28768

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20361

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Lenore F Broughton

Mailing Address 52 Henry St

City State Zip Code
Burlington VT 05401

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

Name of Employer Occupation
Self-Employed Businessman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20706

Amount of Each Receipt this Period
5400.00

Earmarked through HOUSE FREEDOM FUND

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
28135.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20706.0

Amount of Each Receipt this Period
5400.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

5600.00

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

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

FOR LINE NUMBER: PAGE 11 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Lenore F Broughton

Mailing Address 52 Henry St

City Burlington State VT Zip Code 05401

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

Name of Employer Self-Employed Occupation Businessman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20993

Amount of Each Receipt this Period
 -2700.00

REDESIGNATION FROM PRIMARY

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Lenore F Broughton

Mailing Address 52 Henry St

City Burlington State VT Zip Code 05401

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

Name of Employer Self-Employed Occupation Businessman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20994

Amount of Each Receipt this Period
 2700.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Patricia H. Danz

Mailing Address 102 Moss Ridge Court

City Flat Rock State NC Zip Code 28731

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20460

Amount of Each Receipt this Period
 500.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Peter L Davis

Mailing Address 2515 Kanuga Rd

City Hendersonville State NC Zip Code 28739

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.20978

Amount of Each Receipt this Period
 300.00

Amount of Each Receipt this Period
 380.00

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

Mailing Address 24 Iroquois Drive

City Hendersonville State NC Zip Code 28791

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20456

Amount of Each Receipt this Period
 150.00

Amount of Each Receipt this Period
 230.00

C. Full Name (Last, First, Middle Initial)
Glen Engram

Mailing Address 230 Millard J Dr

City Hendersonville State NC Zip Code 28739-4096

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.20968

Amount of Each Receipt this Period
 200.00

Amount of Each Receipt this Period
 380.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 13 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Madeline C Farrell

Mailing Address 1512 Carleton Ter

City Hendersonville State NC Zip Code 28791

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20370

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Charles Fehrenbach

Mailing Address 11 McNeil Avenue

City Centereach State NY Zip Code 11720

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

Name of Employer CENX Occupation Network Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11AI.20965

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Daniel Feuer

Mailing Address 335 Robin Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer Physician Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20579

Amount of Each Receipt this Period
 1000.00

Earmarked through NORPAC

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City State Zip Code
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5990.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20579.0

Amount of Each Receipt this Period
1000.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Willard Fishburne

Mailing Address 4 Penny Ct

City State Zip Code
Hendersonville NC 28739

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

Name of Employer Occupation
Beverly Hanks & Assoc., LLC Real Estate Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.20977

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Barbara Gaby

Mailing Address 445 Old Homestead Trl

City State Zip Code
Johns Creek GA 30097

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20704

Amount of Each Receipt this Period
5400.00

Earmarked through HOUSE FREEDOM FUND

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

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

5700.00

**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 15 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22735.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20704.0

Amount of Each Receipt this Period
5400.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Barbara Gaby

Mailing Address 445 Old Homestead Trl

City State Zip Code
Johns Creek GA 30097

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20990

Amount of Each Receipt this Period
-2700.00

REDESIGNATION FROM PRIMARY

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Barbara Gaby

Mailing Address 445 Old Homestead Trl

City State Zip Code
Johns Creek GA 30097

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20991

Amount of Each Receipt this Period
2700.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

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

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

0.00

**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 16 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Dianne Gallenberger

Mailing Address 1072 Old CCC Road

City Hendersonville State NC Zip Code 28739

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

Name of Employer Retired Occupation Retired Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20453

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Dianne Gallenberger

Mailing Address 1072 Old CCC Road

City Hendersonville State NC Zip Code 28739

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

Name of Employer Retired Occupation Retired Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20455

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Alan J Gindi

Mailing Address 10100 Culver Blvd Suite D

City Culver City State CA Zip Code 90232

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

Name of Employer BAG Investments, Inc. Occupation Founder and President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : SA11AI.20966

Amount of Each Receipt this Period
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Aryeh Goldberg

Mailing Address 2200 S Canfield Ave

City Los Angeles State CA Zip Code 90034

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

Name of Employer S&F Management Company Occupation Director of Corporate Strategy

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20395

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 250 Mountain Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20582

Amount of Each Receipt this Period
 500.00

Earmarked through NORPAC

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20582.0

Amount of Each Receipt this Period
 500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Marilyn Gordon

Mailing Address 234 Estate Drive

City Hendersonville State NC Zip Code 28739

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

Name of Employer Norm's Minit Mark Occupation Convenience Store Owner/Operator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20369

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Norman Gorlyn

Mailing Address 150 Madison Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer Self-Employed Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20583

Amount of Each Receipt this Period
 500.00

Earmarked through NORPAC

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20583.0

Amount of Each Receipt this Period
 500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

800.00

**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 19 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Robert Gottesman

Mailing Address 285 Sunset Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer CPA Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20584

Amount of Each Receipt this Period
 250.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20584.0

Amount of Each Receipt this Period
 250.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dewayne Greene

Mailing Address PO Box 333

City Weaverville State NC Zip Code 28787

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20312

Amount of Each Receipt this Period
 500.00

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

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

750.00

**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 20 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Eve Gregg

Mailing Address 23B Goldfinch Court

City Brevard State NC Zip Code 28712

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **580.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20342

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Eve Gregg

Mailing Address 23B Goldfinch Court

City Brevard State NC Zip Code 28712

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **880.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20368

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Joe Guy

Mailing Address 447 Deer Meadow Ln

City Hendersonville State NC Zip Code 28739

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

Name of Employer Patent Filing Specialists Occupation Patent Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20367

Amount of Each Receipt this Period
300.00

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

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

900.00

**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 21 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Edward Harwood

Mailing Address **PO Box 178**

City **Barnardsville** State **NC** Zip Code **28709**

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

Name of Employer **Self-Employed** Occupation **Contractor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20323

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
Katon Harwood

Mailing Address **449 Paint Fork Road**

City **Barnardsville** State **NC** Zip Code **28709**

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

Name of Employer **Do Creasom Company** Occupation **General Manager**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20321

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Doris Hawkins

Mailing Address **209 Sugar Hollow Rd**

City **Hendersonville** State **NC** Zip Code **28737**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SA11AI.20366

Amount of Each Receipt this Period
 300.00

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

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

5700.00

**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 22 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Melody E Heltman

Mailing Address **PO Box 545**

City **Hendersonville** State **NC** Zip Code **28739**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SA11AI.20365

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Gwendolyn G Hicks

Mailing Address **140 Old CCC Road**

City **Hendersonville** State **NC** Zip Code **28739**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SA11AI.20371

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Jacqueline H. Hornsby

Mailing Address **P.O. Box 1765**

City **Flat Rock** State **NC** Zip Code **28731**

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

Name of Employer **Self-Employed** Occupation **Oral Surgeon**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.20969

Amount of Each Receipt this Period
300.00

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

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

900.00

**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 23 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
George K Humphries

Mailing Address 241 Paint Fork Road

City Barnardsville State NC Zip Code 28709

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20305

Amount of Each Receipt this Period
 260.00

B. Full Name (Last, First, Middle Initial)
Lester Brian Katz

Mailing Address 573 Winthrop Road

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20587

Amount of Each Receipt this Period
 180.00

Earmarked through NORPAC

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20587.0

Amount of Each Receipt this Period
 200.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

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

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

440.00

**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 24 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7770.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20587.1

Amount of Each Receipt this Period
180.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
David Katzin

Mailing Address **137 S. Swall Drive**

City **Beverly Hills** State **CA** Zip Code **90211**

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

Name of Employer Occupation
Retired Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 20 / 2015

Transaction ID : SA11AI.20961

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Phyllis Katzin

Mailing Address **137 S. Swall Drive**

City **Beverly Hills** State **CA** Zip Code **90211**

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 20 / 2015

Transaction ID : SA11AI.20963

Amount of Each Receipt this Period
2700.00

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

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

5400.00

**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 25 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Emilio Krausz

Mailing Address 255 West 88th St

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Microsol Resources Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20589

Amount of Each Receipt this Period
750.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City State Zip Code
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20589.0

Amount of Each Receipt this Period
750.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Joel Krischer

Mailing Address 225 S Linden Dr

City State Zip Code
Beverly Hills CA 90212

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20398

Amount of Each Receipt this Period
1500.00

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

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

2250.00

**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 26 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
William G. Lapsley

Mailing Address 109 Rugby Hollow Drive

City Hendersonville	State NC	Zip Code 28791
------------------------	-------------	-------------------

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

Name of Employer Principal Engineer	Occupation William G. Lapsley & Associates, PA
--	---

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20431

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Christopher Lewis

Mailing Address 979 Sylvan Byway

City Pisgah Forest	State NC	Zip Code 28768
-----------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20343

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ray Lewis

Mailing Address 472 Mountain View Rd

City Mars Hill	State NC	Zip Code 28754
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20315

Amount of Each Receipt this Period
300.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 27 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Mark Liker

Mailing Address 16814 Oak View Drive

City State Zip Code
Encino CA 91436

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

Name of Employer Occupation
Neurosurgical Assoc of LA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20402

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Charles McDonald

Mailing Address 63 McDowell Road

City State Zip Code
Mills River NC 28759

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

Name of Employer Occupation
Henderson County Sheriff

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20450

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
William D. McKibbin

Mailing Address 501 Claremont Drive

City State Zip Code
Flat Rock NC 28731

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

Name of Employer Occupation
Henderson Oil Company Sales/Management

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20449

Amount of Each Receipt this Period
250.00

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

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

1900.00

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

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

FOR LINE NUMBER: PAGE 28 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Samuel Moed

Mailing Address 54 Dana Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer Bristol Meyers Squibb Occupation Exec

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20594

Amount of Each Receipt this Period
 500.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20594.0

Amount of Each Receipt this Period
 500.00

Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Nathan Jones Moore

Mailing Address 10 Holmes Lane

City Arden State NC Zip Code 28704

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

Name of Employer Hartland Payment Systems Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20333

Amount of Each Receipt this Period
 250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 29 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Toni Nayowitz

Mailing Address 493 Forest Ave

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Self-Employed Book Retailer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20596

Amount of Each Receipt this Period
600.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City State Zip Code
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10075.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20596.0

Amount of Each Receipt this Period
600.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Chad Nesbitt

Mailing Address 2714 New Leicester Hwy

City State Zip Code
Leicester NC 28748

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

Name of Employer Occupation
Self-Employed Store Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20330

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 30 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Mindy Orlinksy
 Mailing Address 586 Sunderland Rd
 City State Zip Code
 Teaneck NJ 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker Homemaker
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20561
 Amount of Each Receipt this Period
 360.00
 Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC
 Mailing Address PO BOX 1543
 City State Zip Code
 ENGLEWOOD CLIFFS NJ 07632
 FEC ID number of contributing federal political committee. **C** C00247403
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 860.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20561.0
 Amount of Each Receipt this Period
 360.00
 Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Thomas H Patrick
 Mailing Address 9723 Niblick Ln
 City State Zip Code
 Naples FL 34108-1925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 New Verizon Capital Investment Manager
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11AI.20699
 Amount of Each Receipt this Period
 5400.00
 Earmarked through HOUSE FREEDOM FUND

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

5760.00

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

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

FOR LINE NUMBER: PAGE 31 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 13 2015

Transaction ID : SA11AI.20699.0

Amount of Each Receipt this Period
 5400.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Thomas H Patrick

Mailing Address 9723 Niblick Ln

City State Zip Code
Naples FL 34108-1925

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

Name of Employer Occupation
New Verizon Capital Investment Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 13 2015

Transaction ID : SA11AI.20984

Amount of Each Receipt this Period
 -2700.00

REDESIGNATION FROM PRIMARY

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Thomas H Patrick

Mailing Address 9723 Niblick Ln

City State Zip Code
Naples FL 34108-1925

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

Name of Employer Occupation
New Verizon Capital Investment Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 13 2015

Transaction ID : SA11AI.20985

Amount of Each Receipt this Period
 2700.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 32 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence Pomeranc
 Mailing Address 203 Walnut St
 City State Zip Code
 Englewood NJ 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Thompson Hotel Associates Exec
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20597
 Amount of Each Receipt this Period
 1800.00
 Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC
 Mailing Address PO BOX 1543
 City State Zip Code
 ENGLEWOOD CLIFFS NJ 07632
 FEC ID number of contributing federal political committee. **C** C00247403
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20597.0
 Amount of Each Receipt this Period
 1800.00
 Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
David Rabinowitz
 Mailing Address 83 E Linden Ave
 City State Zip Code
 Englewood NJ 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VP JPMorgan
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20599
 Amount of Each Receipt this Period
 500.00
 Earmarked through NORPAC

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

2300.00

**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 33 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20599.0

Amount of Each Receipt this Period
500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Amanda F Rice

Mailing Address **18 Backwoods Drive**

City **Enka** State **NC** Zip Code **28728**

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

Name of Employer Occupation
AnSCO Association Office Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20328

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Riddle

Mailing Address **158 Green Meadow Drive**

City **Mars Hill** State **NC** Zip Code **28754**

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20319

Amount of Each Receipt this Period
300.00

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

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

800.00

**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 34 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Sarah Rindlaub

Mailing Address 8441 SE 68th St # 217

City Mercer Island State WA Zip Code 98040-5235

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.21035

Amount of Each Receipt this Period
500.00

Earmarked through HOUSE FREEDOM FUND

B. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.21035.0

Amount of Each Receipt this Period
500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Rebecca Samson

Mailing Address 1569 Roybury Drive

City Los Angeles State CA Zip Code 90035

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

Name of Employer S & F Management, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20406

Amount of Each Receipt this Period
1800.00

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

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

2300.00

**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 35 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
San Manuel Band of Mission Indians

Mailing Address 3699 Wilshire Blvd, Ste 1290

City Los Angeles State CA Zip Code 90010

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.21174

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
San Manuel Band of Mission Indians

Mailing Address 3699 Wilshire Blvd, Ste 1290

City Los Angeles State CA Zip Code 90010

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.21175

Amount of Each Receipt this Period
1700.00

C. Full Name (Last, First, Middle Initial)
Herbet Seif

Mailing Address 251 E Linden Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer Occupation
 Epic Asset Mgmt Fund Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20560

Amount of Each Receipt this Period
500.00
 Earmarked through NORPAC

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

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

4900.00

**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 36 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20560.0

Amount of Each Receipt this Period
 _____ 500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Stan Shelley

Mailing Address **25 Country Road**

City **Hendersonville** State **NC** Zip Code **28791**

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

Name of Employer **Shelley's Jewelry** Occupation **Owner**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SA11AI.20374

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
Vicki C Shipman

Mailing Address **PO Box 976**

City **Weaverville** State **NC** Zip Code **28787**

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

Name of Employer **Mission Hospital** Occupation **Nurse**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20308

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 750.00

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

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

FOR LINE NUMBER: PAGE 37 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Zev Shulkin

Mailing Address 5950 Lindenshire #301

City Dallas State TX Zip Code 75230

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20393

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Janice M Stewart

Mailing Address 605 Crooked Creek Road

City Hendersonville State NC Zip Code 28739

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

Name of Employer Lyman, Mullinax, & Weis Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.20970

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Carson Stuckey

Mailing Address 349 View Rock Lane

City Hendersonville State NC Zip Code 28791

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

Name of Employer Self-Employed Occupation Landscape Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20375

Amount of Each Receipt this Period
 500.00

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

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

2300.00

**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 38 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Lynn Sugarman

Mailing Address 525 Sunderland Rd

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Doctor Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20563

Amount of Each Receipt this Period
1000.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City State Zip Code
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2860.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20563.0

Amount of Each Receipt this Period
1000.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Richard E Thompson

Mailing Address 237 Pine Shore Dr

City State Zip Code
Brevard NC 28712

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11AI.20351

Amount of Each Receipt this Period
100.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 39 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Thomas H Thompson

Mailing Address **PO Box 563**

City **Dana** State **NC** Zip Code **28724**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20434

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Richard Uihlein

Mailing Address **1396 N Waukegan Rd**

City **Lake Forest** State **IL** Zip Code **60045**

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

Name of Employer **Uline** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20702

Amount of Each Receipt this Period
5400.00

Earmarked through HOUSE FREEDOM FUND

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address **PO BOX 1948**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00552851**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
17335.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20702.0

Amount of Each Receipt this Period
5400.00

Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 40 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Richard Uihlein

Mailing Address 1396 N Waukegan Rd

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Uline CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20987

Amount of Each Receipt this Period
 -2700.00

REDESIGNATION FROM PRIMARY

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Richard Uihlein

Mailing Address 1396 N Waukegan Rd

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Uline CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20988

Amount of Each Receipt this Period
 2700.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Anthony Beau Waddell

Mailing Address P.O. Box 629

City State Zip Code
Hendersonville NC 28793

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

Name of Employer Occupation
J.H. Reaben Oil & Supply Co. Vice-President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20377

Amount of Each Receipt this Period
 300.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 41 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
J. Hall Hall Waddell

Mailing Address P.O. Box 629

City Hendersonville State NC Zip Code 28793

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

Name of Employer J.H. Reaben Oil & Supply Co. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : SA11AI.20379

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Marilyn Walk

Mailing Address 229 Raintree Drive

City Hendersonville State NC Zip Code 28791

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.20975

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Perry Wallack

Mailing Address 10565 Wilkins Avenue

City Los Angeles State CA Zip Code 90024

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

Name of Employer Cornerstone OnDemand, Inc. Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.20404

Amount of Each Receipt this Period
 1500.00

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

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

3800.00

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

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

FOR LINE NUMBER: PAGE 42 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
James F. Walsh

Mailing Address 225 Amblewood Trail

City Hendersonville State NC Zip Code 28739

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.20378

Amount of Each Receipt this Period
 500.00

700.00

B. Full Name (Last, First, Middle Initial)
Donna Ward

Mailing Address 1396 Pace Road

City Hendersonville State NC Zip Code 28792

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

Name of Employer Ward Brothers Tractor & Salvag Occupation Secretary

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11AI.20432

Amount of Each Receipt this Period
 300.00

300.00

C. Full Name (Last, First, Middle Initial)
Matthew T. Wechtel

Mailing Address 170 Seven Glens Drive

City Weaverville State NC Zip Code 28787

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

Name of Employer NC Farm Bureau Occupation Senior Field Adjuster

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20314

Amount of Each Receipt this Period
 500.00

740.00

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 43 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

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

Mailing Address 371 Cumberland St

City Englewood State NJ Zip Code 07631

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

Name of Employer Executive Occupation Paperclip Software

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20601

Amount of Each Receipt this Period
 500.00

Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.20601.0

Amount of Each Receipt this Period
 500.00

Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Kathy Wells

Mailing Address 2858 Green River Road

City Zirconsia State NC Zip Code 28790

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.20417

Amount of Each Receipt this Period
 634.38

In-kind - Event Food/Beverage

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

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

1134.38

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

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

FOR LINE NUMBER: PAGE 44 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
David Carl Wisotsky
 Mailing Address 32 Franklin St
 City State Zip Code
 Tenafly NJ 07670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Physician Tenafly Pediatrics
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20562
 Amount of Each Receipt this Period
 1000.00
 Earmarked through NORPAC

B. Full Name (Last, First, Middle Initial)
NORPAC
 Mailing Address PO BOX 1543
 City State Zip Code
 ENGLEWOOD CLIFFS NJ 07632
 FEC ID number of contributing federal political committee. **C** C00247403
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1860.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20562.0
 Amount of Each Receipt this Period
 1000.00
 Total earmarked through conduit. PAC limit not affected.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Max Wisotsky
 Mailing Address 54 North Seveth Avenue
 City State Zip Code
 Highland Park NJ 08904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.20602
 Amount of Each Receipt this Period
 500.00
 Earmarked through NORPAC

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.20602.0

Amount of Each Receipt this Period
500.00

Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Aubrey O Woodard

Mailing Address **70 Cheestoonaya Ct**

City **Brevard** State **NC** Zip Code **28712**

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11AI.20448

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Jason Wuliger

Mailing Address **8980 Red Tail Lane**

City **Kirtland** State **OH** Zip Code **44094**

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

Name of Employer Occupation
Clean WaterNet LTD Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : SA11AI.20391

Amount of Each Receipt this Period
1500.00

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 46 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
James D Yelton

Mailing Address 221 Jupiter Road

City Weaverville State NC Zip Code 28787

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11AI.20316

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Daniel M. Yoder

Mailing Address 265 Fernbrook Way

City Hendersonville State NC Zip Code 28791

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

Name of Employer Looking Glass Eye Center Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11AI.20411

Amount of Each Receipt this Period
 300.00

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).....

800.00

87034.38

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

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

FOR LINE NUMBER: PAGE 47 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN PRINCIPLES

Mailing Address 20533 BISCAYNE BLVD
#250

City State Zip Code
MIAMI FL 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2015

Transaction ID : SA11C.20413

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CRACKER BARREL OLD COUNTRY STORE, INC. PAC

Mailing Address 307 HARTMANN DRIVE
PO BOX 787

City State Zip Code
LEBANON TN 37088

FEC ID number of contributing federal political committee. **C** C00252791

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11C.20981

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FLORIDA CONGRESSIONAL COMMITTEE

Mailing Address 6100 HOLLYWOOD BLVD
SUITE 305

City State Zip Code
HOLLYWOOD CA 33024

FEC ID number of contributing federal political committee. **C** C00127811

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2015

Transaction ID : SA11C.20414

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 48 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
FLORIDA CONGRESSIONAL COMMITTEE

Mailing Address **6100 HOLLYWOOD BLVD
SUITE 305**

City **HOLLYWOOD** State **CA** Zip Code **33024**

FEC ID number of contributing federal political committee. **C C00127811**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11C.20420

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
ITG HOLDINGS U.S.A. INC. POLITICAL ACTION COMMITTEE (AKA ITG PAC)

Mailing Address **714 GREEN VALLEY ROAD**

City **GREENSBORO** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C C00587543**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015

Transaction ID : SA11C.20421

Amount of Each Receipt this Period
 _____ 2500.00

C. Full Name (Last, First, Middle Initial)
ITG HOLDINGS U.S.A. INC. POLITICAL ACTION COMMITTEE (AKA ITG PAC)

Mailing Address **714 GREEN VALLEY ROAD**

City **GREENSBORO** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C C00587543**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11C.20429

Amount of Each Receipt this Period
 _____ 2500.00

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

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

_____ 6000.00

**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 49 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
ITG HOLDINGS U.S.A. INC. POLITICAL ACTION COMMITTEE (AKA ITG PAC)

Mailing Address 714 GREEN VALLEY ROAD

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C** C00587543

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11C.21103

Amount of Each Receipt this Period
 -2500.00

Charge Back

B. Full Name (Last, First, Middle Initial)
UNIFI, INC POLITICAL ACTION COMMITTEE

Mailing Address 7201 WEST FRIENDLY AVENUE

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C** C00502351

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11C.20979

Amount of Each Receipt this Period
 1000.00

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).....

-1500.00

7000.00

**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 50 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Add A Space		Date of Disbursement
Mailing Address 4001 ASHEVILLE HWY.		M M / D D / Y Y Y Y 10 / 01 / 2015
City HENDERSONVILLE	State NC	Zip Code 28791
Purpose of Disbursement Rent	Amount of Each Disbursement this Period 65.00	
Candidate Name	Transaction ID : SB17.20464	
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:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Add A Space		Date of Disbursement
Mailing Address 4001 ASHEVILLE HWY.		M M / D D / Y Y Y Y 11 / 03 / 2015
City HENDERSONVILLE	State NC	Zip Code 28791
Purpose of Disbursement Rent	Amount of Each Disbursement this Period 65.00	
Candidate Name	Transaction ID : SB17.20533	
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:	Category/ Type	

Full Name (Last, First, Middle Initial) c. Add A Space		Date of Disbursement
Mailing Address 4001 ASHEVILLE HWY.		M M / D D / Y Y Y Y 12 / 02 / 2015
City HENDERSONVILLE	State NC	Zip Code 28791
Purpose of Disbursement Rent	Amount of Each Disbursement this Period 65.00	
Candidate Name	Transaction ID : SB17.21127	
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:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 68900		Amount of Each Disbursement this Period 317.10 Transaction ID : SB17.20529
City Seattle	State WA	
Zip Code 98168	Purpose of Disbursement Airfare	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:	

Full Name (Last, First, Middle Initial) B. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 68900		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.20532
City Seattle	State WA	
Zip Code 98168	Purpose of Disbursement Airfare	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:	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 286.10 Transaction ID : SB17.20463
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airfare	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).....	317.10
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 52 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 267.70 Transaction ID : SB17.20542
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airfare	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:	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 140.10 Transaction ID : SB17.20919
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airfare	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:	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 411.10 Transaction ID : SB17.20920
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airfare	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).....	818.90
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 53 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 98.60
City DFW Airport	State TX Zip Code 75261	
Purpose of Disbursement Airfare	Candidate Name	Transaction ID : SB17.21158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 316.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Transportation	Candidate Name	Transaction ID : SB17.20481
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 72.89
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Transportation	Candidate Name	Transaction ID : SB17.20500
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	487.49
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 54 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 146.00 Transaction ID : SB17.20501
City Washington State DC Zip Code 20002	Purpose of Disbursement Transportation 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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 146.00 Transaction ID : SB17.20502
City Washington State DC Zip Code 20002	Purpose of Disbursement Transportation 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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 4.00 Transaction ID : SB17.20551
City Washington State DC Zip Code 20002	Purpose of Disbursement Transportation 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)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	296.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 50 Massachusetts Av		Amount of Each Disbursement this Period 626.90
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Transportation	Transaction ID : SB17.20934
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 5555 Hilton Ave Suite 106		Amount of Each Disbursement this Period 540.90
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.20951
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Budget.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 351 Marin Blvd		Amount of Each Disbursement this Period 30.00
City Jersey City	State NJ	
Zip Code 07302	Purpose of Disbursement Transportation	Transaction ID : SB17.20544
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	626.90
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 56 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 300 First Street, SE			Amount of Each Disbursement this Period 67.50
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food/Beverage		Candidate Name	Transaction ID : SB17.20499
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:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 300 First Street, SE			Amount of Each Disbursement this Period 157.71
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food/Beverage		Candidate Name	Transaction ID : SB17.20938
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:	

Full Name (Last, First, Middle Initial) C. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 300 First Street, SE			Amount of Each Disbursement this Period 86.36
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food / Beverage		Candidate Name	Transaction ID : SB17.21159
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).....	311.57
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 57 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. CM&CO, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 3858.87
City Raleigh	State NC	
Zip Code 27624	Purpose of Disbursement Accounting Services	Transaction ID : SB17.20547
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CM&CO, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 1437.35
City Raleigh	State NC	
Zip Code 27624	Purpose of Disbursement Accounting Services	Transaction ID : SB17.21145
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Congressional Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 2001 New Hampshire Ave, NW		Amount of Each Disbursement this Period 150.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.20921
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5446.22
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 58 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Congressional Institute			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015	
Mailing Address 1700 Diagonal Road, #730			Amount of Each Disbursement this Period 1370.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB17.21128	
Purpose of Disbursement Registration Fee		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:				

Full Name (Last, First, Middle Initial) B. Hampton Inns & Suites			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015	
Mailing Address 18 Rockwood Road			Amount of Each Disbursement this Period 178.64	
City Fletcher	State NC	Zip Code 28732	Transaction ID : SB17.20926	
Purpose of Disbursement Lodging		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:				

Full Name (Last, First, Middle Initial) C. Hilton Asheville Biltmore Park			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015	
Mailing Address 43 Town Square Blvd			Amount of Each Disbursement this Period 417.66	
City Asheville	State NC	Zip Code 28803	Transaction ID : SB17.20476	
Purpose of Disbursement Lodging		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).....	1966.30
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 59 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Hilton Asheville Biltmore Park		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 43 Town Square Blvd		Amount of Each Disbursement this Period 134.17
City Asheville State NC Zip Code 28803	Category/Type	
Purpose of Disbursement Lodging	Candidate Name	Transaction ID : SB17.20477
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:		

Full Name (Last, First, Middle Initial) B. Hotels.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 10440 North Central Expressway Suite 400		Amount of Each Disbursement this Period 312.18
City Dallas State TX Zip Code 75231	Category/Type	
Purpose of Disbursement Lodging	Candidate Name	Transaction ID : SB17.20503
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:		

Full Name (Last, First, Middle Initial) c. Hotels.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 10440 North Central Expressway Suite 400		Amount of Each Disbursement this Period 552.96
City Dallas State TX Zip Code 75231	Category/Type	
Purpose of Disbursement Lodging	Candidate Name	Transaction ID : SB17.20508
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).....	999.31
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 60 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. HOUSE FREEDOM FUND		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address PO BOX 1948		Amount of Each Disbursement this Period 2756.75 Transaction ID : SB17.21164
City ALEXANDRIA	State VA Zip Code 22313	
Purpose of Disbursement Fundraising/Merchant Fees	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:		

Full Name (Last, First, Middle Initial) B. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address First St SE		Amount of Each Disbursement this Period 860.05 Transaction ID : SB17.20483
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Event Host Gifts	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:		

Full Name (Last, First, Middle Initial) c. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address First St SE		Amount of Each Disbursement this Period 137.40 Transaction ID : SB17.20515
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Event Host Gifts	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).....	3754.20
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 61 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address First St SE		Amount of Each Disbursement this Period 400.20 Transaction ID : SB17.21132
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Event Host Gifts	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:	

Full Name (Last, First, Middle Initial) B. Morton's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 1050 Connecticut Ave NW		Amount of Each Disbursement this Period 210.55 Transaction ID : SB17.21134
City Washington DC	State DC	
Zip Code 20036	Purpose of Disbursement Food / Beverage	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:	

Full Name (Last, First, Middle Initial) c. Mosaic Hotel- Beverly Hills		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 125 S Spalding Dr		Amount of Each Disbursement this Period 216.99 Transaction ID : SB17.20540
City Beverly Hills	State CA	
Zip Code 90212	Purpose of Disbursement Lodging	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).....	827.74
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 62 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. North Carolina State Board of Elections		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 441 North Harrington Street		Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.21187
City Raleigh	State NC	
Zip Code 27603	Purpose of Disbursement Filing Fee	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	State: District:	
	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. NYC Taxi		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 33 Beaver St		Amount of Each Disbursement this Period 25.38 Transaction ID : SB17.20495
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Transportation	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	State: District:	
	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. NYC Taxi		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 33 Beaver St		Amount of Each Disbursement this Period 56.05 Transaction ID : SB17.20923
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Transportation	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	State: District:	
	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1821.43
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 63 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. NYC Taxi		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 33 Beaver St		Amount of Each Disbursement this Period 12.88 Transaction ID : SB17.20930
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Transportation	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:	

Full Name (Last, First, Middle Initial) B. NYC Taxi		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 33 Beaver St		Amount of Each Disbursement this Period 19.15 Transaction ID : SB17.20931
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Transportation	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:	

Full Name (Last, First, Middle Initial) c. Park Lane Hotel		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 36 Central Park S		Amount of Each Disbursement this Period 490.94 Transaction ID : SB17.20496
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	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).....	522.97
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 64 OF 83	
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Park Lane Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 36 Central Park S		Amount of Each Disbursement this Period 52.26
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	Transaction ID : SB17.20933
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Robert W. Penland		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address P.O. Box 777		Amount of Each Disbursement this Period 3178.56
City Enka	State NC	
Zip Code 28728	Purpose of Disbursement Management Consulting, Mileage	Transaction ID : SB17.20525
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Robert W. Penland		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address P.O. Box 777		Amount of Each Disbursement this Period 3155.04
City Enka	State NC	
Zip Code 28728	Purpose of Disbursement Management Consulting, Mileage	Transaction ID : SB17.20959
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6385.86
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 65 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Robert W. Penland		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address P.O. Box 777		Amount of Each Disbursement this Period 3192.00 Transaction ID : SB17.21147
City Enka	State NC	
Zip Code 28728	Purpose of Disbursement Management Consulting, Mileage	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:	

Full Name (Last, First, Middle Initial) B. Rare Sweets		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 936 Palmer Alley NW		Amount of Each Disbursement this Period 27.50 Transaction ID : SB17.20514
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Food/Beverage	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:	

Full Name (Last, First, Middle Initial) c. Rare Sweets		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 936 Palmer Alley NW		Amount of Each Disbursement this Period 36.48 Transaction ID : SB17.20932
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Food/Beverage	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).....	3255.98
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 66 OF 83
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Rare Sweets		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 936 Palmer Alley NW		Amount of Each Disbursement this Period 280.93 Transaction ID : SB17.21150
City Washington State DC Zip Code 20005	Purpose of Disbursement Food / Beverage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rare Sweets		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 936 Palmer Alley NW		Amount of Each Disbursement this Period 34.90 Transaction ID : SB17.21160
City Washington State DC Zip Code 20005	Purpose of Disbursement Food / Beverage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. RedPledge		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 4400 North Point Parkway		Amount of Each Disbursement this Period 87.40 Transaction ID : SB17.20471
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	280.93
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 67 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. RedPledge		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 4400 North Point Parkway		Amount of Each Disbursement this Period 37.53
City Alpharetta	State GA	
Zip Code 30022	Purpose of Disbursement Merchant Fee	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RedPledge		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 4400 North Point Parkway		Amount of Each Disbursement this Period 26.67
City Alpharetta	State GA	
Zip Code 30022	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Republican Congressional Spouses		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 2336 South Queen Street		Amount of Each Disbursement this Period 25.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Entrance Fee	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	89.20
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 68 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Republican Congressional Spouses		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 2336 South Queen Street		Amount of Each Disbursement this Period 25.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Entrance Fee	Transaction ID : SB17.20537
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Republican Congressional Spouses		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 2336 South Queen Street		Amount of Each Disbursement this Period 35.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Entrance Fee	Transaction ID : SB17.20943
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sarabeth's		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 40 Central Park S		Amount of Each Disbursement this Period 48.28
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.20922
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	108.28
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 69 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial)
A. SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2015

Amount of Each Disbursement this Period: 261.70

Transaction ID : SB17.20526

Full Name (Last, First, Middle Initial)
B. SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 09 / 2015

Amount of Each Disbursement this Period: 16.75

Transaction ID : SB17.20548

Full Name (Last, First, Middle Initial)
c. The Stoneridge Group, LLC

Mailing Address 4400 North Point Parkway Suite 190

City Alpharetta State GA Zip Code 30022

Purpose of Disbursement Online Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2015

Amount of Each Disbursement this Period: 19.95

Transaction ID : SB17.20470

SUBTOTAL of Disbursements This Page (optional) 298.40

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 70 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. The Stoneridge Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015	
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 19.95	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : SB17.20522	
Purpose of Disbursement Online Services		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:				

Full Name (Last, First, Middle Initial) B. The Stoneridge Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015	
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 19.95	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : SB17.21129	
Purpose of Disbursement Online Services		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:				

Full Name (Last, First, Middle Initial) c. TriConsultants			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015	
Mailing Address 449 East 84th Street			Amount of Each Disbursement this Period 4000.00	
City New York	State NY	Zip Code 10028	Transaction ID : SB17.20528	
Purpose of Disbursement Fundraising Consulting		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).....	4039.90
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 71 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. TriConsultants			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015	
Mailing Address 449 East 84th Street			Amount of Each Disbursement this Period 2000.00	
City New York	State NY	Zip Code 10028	Transaction ID : SB17.21161	
Purpose of Disbursement Fundraising Consulting		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:				

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 15.42	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20469	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 23.05	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20486	
Purpose of Disbursement Transportation		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).....	2038.47
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 72 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 17.45	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20487	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 18.42	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20506	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 15.15	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20507	
Purpose of Disbursement Transportation		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).....	51.02
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 73 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 18.04 Transaction ID : SB17.20509
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 5.84 Transaction ID : SB17.20512
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 15.89 Transaction ID : SB17.20543
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	39.77
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 74 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 23.05	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20546	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 10.74	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20935	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 15.32	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.20936	
Purpose of Disbursement Transportation		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).....	49.11
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 75 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 21.12 Transaction ID : SB17.20937
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 12.36 Transaction ID : SB17.20939
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 12.74 Transaction ID : SB17.20940
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	46.22
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 76 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 13.33 Transaction ID : SB17.20941
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 19.39 Transaction ID : SB17.20942
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 182 Howard Street		Amount of Each Disbursement this Period 48.77 Transaction ID : SB17.20947
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Transportation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	81.49
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 77 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 16.48	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.21136	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) B. Uber Technologies, Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015	
Mailing Address 182 Howard Street			Amount of Each Disbursement this Period 15.15	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.21143	
Purpose of Disbursement Transportation		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:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015	
Mailing Address 675 South 4th Street			Amount of Each Disbursement this Period 17.28	
City Highlands	State NC	Zip Code 28741	Transaction ID : SB17.20539	
Purpose of Disbursement Postage		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).....	48.91
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 78 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 1.20 Transaction ID : SB17.20948
City Highlands	State NC Zip Code 28741	
Purpose of Disbursement Postage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 19.60 Transaction ID : SB17.21165
City Highlands	State NC Zip Code 28741	
Purpose of Disbursement Postage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 13.34 Transaction ID : SB17.21166
City Highlands	State NC Zip Code 28741	
Purpose of Disbursement Postage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34.14
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 79 OF 83			
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 928.10 Transaction ID : SB17.20517
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone Services	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:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 138.14 Transaction ID : SB17.20960
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone Services	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:	

Full Name (Last, First, Middle Initial) c. Kathy Wells		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 2858 Green River Road		Amount of Each Disbursement this Period 634.38 Transaction ID : SB17.20419
City Zirconia	State NC	
Zip Code 28790	Purpose of Disbursement In-kind - Event Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	928.10
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 80 OF 83		
	<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)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. WNC Agricultural Center		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 1301 Fanning Bridge Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.20545
City Fletcher	State NC Zip Code 28732	
Purpose of Disbursement Event Site Fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	38166.91

**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 81 OF 83	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. Mark R Meadows		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 811		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB19A.21106
City Hendersonville State NC Zip Code 28793-0811	Purpose of Disbursement Loan Repayment	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: NC District: 11		

Full Name (Last, First, Middle Initial) B. Mark R Meadows		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 811		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB19A.21107
City Hendersonville State NC Zip Code 28793-0811	Purpose of Disbursement Loan Repayment	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: NC District: 11		

Full Name (Last, First, Middle Initial) C. Mark R Meadows		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 811		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB19A.21146
City Hendersonville State NC Zip Code 28793-0811	Purpose of Disbursement Loan Repayment	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: NC District: 11		

SUBTOTAL of Disbursements This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	12000.00

**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 82 OF 83
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Meadows for Congress

Full Name (Last, First, Middle Initial) A. FRIENDS OF SCOTT DESJARLAIS		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address PO. BOX 90133		Amount of Each Disbursement this Period 4,000.00 Transaction ID : SB21.21169
City NASHVILLE State TN Zip Code 37209	Purpose of Disbursement Federal Contribution	
Candidate Name SCOTT HON. DESJARLAIS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 04		

Full Name (Last, First, Middle Initial) B. STUTZMAN FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address PO BOX 129		Amount of Each Disbursement this Period 4,000.00 Transaction ID : SB21.21171
City HOWE State IN Zip Code 46746	Purpose of Disbursement Federal Contribution	
Candidate Name MARLIN A STUTZMAN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 00		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	4000.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Meadows for Congress

Transaction ID : **SC/10.4101**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Mark R Meadows

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 811

City State ZIP Code
Hendersonville NC 28793-0811

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	89500.00	160500.00

TERMS

Date Incurred: M 09 / D 29 / Y 2011
 Date Due: M / D / Y none
 Interest Rate: 0.00 % (apr)
 Secured: 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: []

SUBTOTALS This Period This Page (optional).....	▶	160500.00
TOTALS This Period (last page in this line only).....	▶	160500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.