

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Meadows for Congress

ADDRESS (number and street) ▼

PO Box 811

Check if different than previously reported. (ACC)

Hendersonville

NC

28793-0811

2. **FEC IDENTIFICATION NUMBER** ▼

C C00503094

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

NC

11

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Collin McMichael

Signature of Treasurer Collin McMichael

[Electronically Filed]

Date

/ /

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

| | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

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)).... | 30700.00 | 33225.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 30700.00 | 33225.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 33761.19 | 52288.06 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 33761.19 | 52288.06 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 14433.72 | |
| 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)..... | 249000.00 | |

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: / / / / To: / / / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 12300.00 | 12300.00 |
| (ii) Unitemized..... | 100.00 | 125.00 |
| (iii) TOTAL of contributions from individuals ▶ | 12400.00 | 12425.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 17500.00 | 20000.00 |
| (d) The Candidate..... | 800.00 | 800.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 30700.00 | 33225.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 250.00 | 250.00 |
| 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.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 30950.00 | 33475.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 33761.19 | 52288.06 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 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 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 33761.19 | 52288.06 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 17244.91 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 30950.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 48194.91 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 33761.19 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 14433.72 |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 27 |
| | <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 | |

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)
Robert D Baber

Mailing Address 5057 Lighthouse Court

City Morganton State NC Zip Code 28655

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

Name of Employer Baber Turnaround Consulting Occupation Economic Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11Al.8666

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jeani H. Banks

Mailing Address P.O. Box 1037

City Burnsville State NC Zip Code 28714

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

Name of Employer N/A Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA11Al.8642

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
William R. Banks

Mailing Address P.O. Box 1037

City Burnsville State NC Zip Code 28714

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

Name of Employer Banco Company Occupation Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11Al.8676

Amount of Each Receipt this Period
 250.00

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 6 OF 27 |
| | <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 | |

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)
Mark L. Battle

Mailing Address 1128 Topaz Way

City Marietta State GA Zip Code 30068

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

Name of Employer World Fiber Tech Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2012

Transaction ID : SA11AI.8739

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 130 Whispering Pines Drive

City Waynesville State NC Zip Code 28786

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

Name of Employer Peak Energy Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA11AI.8637

Amount of Each Receipt this Period
 800.00

C. Full Name (Last, First, Middle Initial)
Charles Philip Byers

Mailing Address 243 McCall Drive

City Forest City State NC Zip Code 28043

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2012

Transaction ID : SA11AI.8662

Amount of Each Receipt this Period
 250.00

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

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

3550.00

**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 27 |
| | <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 | |

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)
Orville Coward Jr.

Mailing Address P.O. Box 270

City: Webster State: NC Zip Code: 28788

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

Name of Employer: Coward, Hicks & Siler Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 11 / 2012

Transaction ID : SA11AI.8674

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Jane Ebberts

Mailing Address P.O. Box 143

City: Cashiers State: NC Zip Code: 28717

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

Name of Employer: Landmark Realty Group Occupation: Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 03 / 2012

Transaction ID : SA11AI.8640

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Susan D. Fletcher

Mailing Address P.O. Box 2599

City: Candler State: NC Zip Code: 28715

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

Name of Employer: N/A Occupation: Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 08 / 2012

Transaction ID : SA11AI.8660

Amount of Each Receipt this Period: 500.00

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

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

1250.00

**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 27 |
| | <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 | |

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)
Roger C. Floren II

Mailing Address P.O. Box 1160

City State Zip Code
Fairview NC 28730

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

Name of Employer Occupation
Cane Creek Pharmacy President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2012

Transaction ID : SA11AI.8679

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Viola N. Forga

Mailing Address P.O. Box 188

City State Zip Code
Hazelwood NC 28738

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SA11AI.8645

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Kimberly E. Gold

Mailing Address 67 Oak Gate Drive

City State Zip Code
Hendersonville NC 28739

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

Name of Employer Occupation
N/A Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2012

Transaction ID : SA11AI.8678

Amount of Each Receipt this Period
500.00

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 9 OF 27 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

A. Full Name (Last, First, Middle Initial)
Margaret M. Hunt

Mailing Address P.O. Box 1175

City Brevard State NC Zip Code 28712

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA11AI.8638

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
J Loyd Kirk

Mailing Address 16 Boddington Court

City Asheville State NC Zip Code 28803

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA11AI.8644

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
C. Wayne Loudermilch

Mailing Address P.O. Box 22

City Point Clear State AL Zip Code 36564

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11AI.8675

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**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 10 OF 27 |
| | <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 | |

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)
Joan G. MacNeill

Mailing Address P.O. Box 40

City Webster State NC Zip Code 28788

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2012

Transaction ID : SA11AI.8661

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Julena Y. McQueen

Mailing Address 210 Shepard Way

City Burnsville State NC Zip Code 28714

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

Name of Employer Four Jacks, LLC Occupation Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11AI.8677

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Nancy B. Miller

Mailing Address 33 Bideford Row

City Asheville State NC Zip Code 28803

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

Name of Employer N/A Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2012

Transaction ID : SA11AI.8733

Amount of Each Receipt this Period
 250.00

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: PAGE 11 OF 27
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Christopher J. Petrella

Mailing Address 236 Ellington

City Spindale State NC Zip Code 28160

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

Name of Employer Self-Employed Occupation Economic Development Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11AI.8667

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Steven F. Whitmire

Mailing Address 502 Lake Shore Drive

City Blairsville State GA Zip Code 30512

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

Name of Employer Long Branch Partners Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11AI.8681

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Samuel K. Young

Mailing Address 109 Laurel Street

City Burnsville State NC Zip Code 28714

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

Name of Employer Self-Employed Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11AI.8669

Amount of Each Receipt this Period
 500.00

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

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

1750.00

12300.00

**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 12 OF 27 |
| | <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)
BRANCH BANK & TRUST POLITICAL ACTION COMMITTEE

Mailing Address 150 SOUTH STRATFORD ROAD
SUITE 401

City WINSTON SALEM State NC Zip Code 27104

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : SA11C.8668

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2012

Transaction ID : SA11C.8729

Amount of Each Receipt this Period
1000.00

Primary Election, 2012 Debt Relief

C. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2012

Transaction ID : SA11C.8737

Amount of Each Receipt this Period
2500.00

Debt Retirement

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

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

4000.00

**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 13 OF 27 |
| | <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)
GLAXOSMITHKLINE LLC PAC (GSK PAC)

Mailing Address **FIVE MOORE DRIVE**
PO BOX 13358

City **RES. TRIANGLE PARK** State **NC** Zip Code **27709**

FEC ID number of contributing federal political committee. **C C00199703**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 08 / 2012

Transaction ID : SA11C.8664

Amount of Each Receipt this Period
5000.00

Debt Retirement

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address **2901 TELESTAR CT.**

City **FALLS CHURCH** State **VA** Zip Code **22042**

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 24 / 2012

Transaction ID : SA11C.8735

Amount of Each Receipt this Period
2500.00

Debt Retirement

C. Full Name (Last, First, Middle Initial)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address **P. O. BOX 718**

City **WINSTON-SALEM** State **NC** Zip Code **27102**

FEC ID number of contributing federal political committee. **C C00042002**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 07 / 2012

Transaction ID : SA11C.8672

Amount of Each Receipt this Period
5000.00

Primary Election, 2012 Debt Relief

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

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

12500.00

**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 27 |
| | <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)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2012

Transaction ID : SA11C.8731

Amount of Each Receipt this Period
 1000.00

Primary Election, 2012 Debt Relief

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

17500.00

**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 27 |
| | <input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 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)
TAKE BACK NORTH CAROLINA

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

City Athens State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C** C00513929

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA12.8647

Amount of Each Receipt this Period
 250.00

Joint Fundraiser - All donors previously reported

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

250.00

**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 17 OF 27 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Thomas M. Apodaca | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 |
| Mailing Address 214 N. King Street | | Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.8622 |
| City Hendersonville State NC Zip Code 28792 | Purpose of Disbursement Compensation - Campaign work 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Thomas M. Apodaca | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 |
| Mailing Address 214 N. King Street | | Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.8654 |
| City Hendersonville State NC Zip Code 28792 | Purpose of Disbursement Compensation - Campaign work 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Thomas M. Apodaca | | Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012 |
| Mailing Address 214 N. King Street | | Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.8724 |
| City Hendersonville State NC Zip Code 28792 | Purpose of Disbursement Compensation - Campaign work 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3900.00 |
| 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 18 OF 27 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Charles W Archerd | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address 504 Holt Lane | | Amount of Each Disbursement this Period 1282.12 Transaction ID : SB17.8685 |
| City Asheville State NC Zip Code 28803 | Purpose of Disbursement Reimbursement - Fundraising Expenses - Food/Beverages 003 Category/Type | |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Cardmember Services | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address P.O. Box 790408 | | Amount of Each Disbursement this Period 3282.75 Transaction ID : SB17.8692 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit Card Transactions - see itemization 001 Category/Type | |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Hilton Asheville Biltmore Park | | Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012 |
| Mailing Address 43 Town Square Blvd | | Amount of Each Disbursement this Period 1271.15 Transaction ID : SB17.8692.6 [MEMO ITEM] |
| City Asheville State NC Zip Code 28803 | Purpose of Disbursement Hotel - Election Night 001 Category/Type | |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4564.87 |
| 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 19 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Capitol Hill Hotel | | Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012 |
| Mailing Address 200 C Street, SE | | Amount of Each Disbursement this Period 247.30 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Hotel | Transaction ID : SB17.8692.8 |
| Candidate Name Meadows for Congress | Category/Type 002 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Expedia | | Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012 |
| Mailing Address 333 108th Avenue, NE | | Amount of Each Disbursement this Period 339.86 |
| City Bellevue State WA Zip Code 98004 | Purpose of Disbursement Airfare | Transaction ID : SB17.8692.9 |
| Candidate Name Meadows for Congress | Category/Type 002 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ad-venture Promotions | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 2625 Regency Road | | Amount of Each Disbursement this Period 427.14 |
| City Lexington State KY Zip Code 40503 | Purpose of Disbursement Marketing - Hats | Transaction ID : SB17.8692.15 |
| Candidate Name Meadows for Congress | Category/Type 006 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| 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 20 OF 27 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Ingle's Grocery | | Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2012 |
| Mailing Address US 64 | | Amount of Each Disbursement this Period 470.98 |
| City Cashiers State NC Zip Code 28717 | Purpose of Disbursement Gift Cards 001 Category/Type | Transaction ID : SB17.8692.16 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: NC District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Robert Doug Crosby | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 |
| Mailing Address 12 Robert Sluder Lane | | Amount of Each Disbursement this Period 1170.00 |
| City Newland State NC Zip Code 28657 | Purpose of Disbursement Compensation - Campaign work 001 Category/Type | Transaction ID : SB17.8619 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) c. Robert Doug Crosby | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 |
| Mailing Address 12 Robert Sluder Lane | | Amount of Each Disbursement this Period 1170.00 |
| City Newland State NC Zip Code 28657 | Purpose of Disbursement Compensation - Campaign work 001 Category/Type | Transaction ID : SB17.8655 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2340.00 |
| 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 21 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Robert Doug Crosby | | Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012 |
| Mailing Address 12 Robert Sluder Lane | | Amount of Each Disbursement this Period 1170.00 Transaction ID : SB17.8728 |
| City Newland | State NC | |
| Zip Code 28657 | Purpose of Disbursement Compensation - Campaign work | Category/ Type 001 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NC District: 11 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Christopher D. McClure | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 |
| Mailing Address 127 Poplar Drive | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.8620 |
| City Clyde | State NC | |
| Zip Code 28721 | Purpose of Disbursement Compensation - Campaign work | Category/ Type 001 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NC District: 11 | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Christopher D. McClure | | Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012 |
| Mailing Address 127 Poplar Drive | | Amount of Each Disbursement this Period 499.49 Transaction ID : SB17.8628 |
| City Clyde | State NC | |
| Zip Code 28721 | Purpose of Disbursement Reimbursement - see below | Category/ Type 002 |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NC District: 11 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3669.49 |
| 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 22 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Enterprise Rent A Car | | Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012 |
| Mailing Address 61 Terminal Drive, Ste 18 | | Amount of Each Disbursement this Period 304.19 |
| City Fletcher State NC Zip Code 28732 | Purpose of Disbursement Rental Car 002 | |
| Candidate Name Meadows for Congress | | Transaction ID : SB17.8628.0 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Christopher D. McClure | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 |
| Mailing Address 127 Poplar Drive | | Amount of Each Disbursement this Period 2000.00 |
| City Clyde State NC Zip Code 28721 | Purpose of Disbursement Compensation - Campaign work 001 | |
| Candidate Name Meadows for Congress | | Transaction ID : SB17.8656 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Christopher D. McClure | | Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012 |
| Mailing Address 127 Poplar Drive | | Amount of Each Disbursement this Period 2000.00 |
| City Clyde State NC Zip Code 28721 | Purpose of Disbursement Compensation 001 | |
| Candidate Name Meadows for Congress | | Transaction ID : SB17.8726 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4000.00 |
| 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 23 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Mark R Meadows | | Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012 |
| Mailing Address PO Box 811 | | Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.8751 |
| City Hendersonville State NC Zip Code 28793-0811 | Purpose of Disbursement In-kind - office rent 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" 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 12 / 01 / 2012 |
| Mailing Address PO Box 811 | | Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.8753 |
| City Hendersonville State NC Zip Code 28793-0811 | Purpose of Disbursement In-kind - office rent Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) c. NC Dept of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012 |
| Mailing Address P.O. Box 25000 | | Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.8648 |
| City Raleigh State NC Zip Code 27640 | Purpose of Disbursement Tax - Robert Douglas Crosby 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1060.00 |
| 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 24 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Oak Grove Campaigns | | Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012 |
| Mailing Address 2474 Walnut Street, #322 | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.8627 |
| City Cary State NC Zip Code 27518 | Purpose of Disbursement Consultant 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ron Pressley | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address 5 Hearth Stone Lane | | Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.8683 |
| City Flat Rock State NC Zip Code 28731 | Purpose of Disbursement Telephone Lease 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) c. The Grove Park Inn | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address 290 Macon Avenue | | Amount of Each Disbursement this Period 2811.83 Transaction ID : SB17.8721 |
| City Asheville State NC Zip Code 28804 | Purpose of Disbursement Food/Beverage 003 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4961.83 |
| 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 25 OF 27 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Pamela G. Ward | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address P.O. Box 811 | | Amount of Each Disbursement this Period 242.00 Transaction ID : SB17.8684 |
| City Highlands | State NC | |
| Purpose of Disbursement Compensation - Campaign Work | 001 | Category/ Type |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC | District: 11 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Kenneth Douglas West | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 |
| Mailing Address 440 Herbert Hills Drive | | Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.8621 |
| City Hayesville | State NC | |
| Purpose of Disbursement Compensation | 001 | Category/ Type |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC | District: 11 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Kenneth Douglas West | | Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012 |
| Mailing Address 440 Herbert Hills Drive | | Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.8626 |
| City Hayesville | State NC | |
| Purpose of Disbursement Compensation | 001 | Category/ Type |
| Candidate Name Meadows for Congress | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC | District: 11 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3442.00 |
| 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 26 OF 27 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
Meadows for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Kenneth Douglas West | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 |
| Mailing Address 440 Herbert Hills Drive | | Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.8657 |
| City Hayesville State NC Zip Code 28904 | Purpose of Disbursement Compensation 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Kenneth Douglas West | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address 440 Herbert Hills Drive | | Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.8723 |
| City Hayesville State NC Zip Code 28904 | Purpose of Disbursement Compensation 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) c. Kenneth Douglas West | | Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012 |
| Mailing Address 440 Herbert Hills Drive | | Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.8727 |
| City Hayesville State NC Zip Code 28904 | Purpose of Disbursement Compensation 001 Category/Type | |
| Candidate Name Meadows for Congress | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NC District: 11 | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4800.00 |
| TOTAL This Period (last page this line number only)..... | 32738.19 |

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4101
Meadows for Congress

| | | |
|---|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Mark R Meadows | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 811 | | |
| City Hendersonville | State NC | ZIP Code 28793-0811 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 250000.00 | 1000.00 | 249000.00 |

TERMS

| | | | |
|----------------------|----------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 09 / D 29 / Y 2011 | M / D / Y none | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

| | |
|--|-----------|
| SUBTOTALS This Period This Page (optional)..... | 249000.00 |
| TOTALS This Period (last page in this line only)..... | 249000.00 |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |