

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
Hudson for Congress

ADDRESS (number and street) PO Box 5053
 Check if different than previously reported. (ACC) Concord NC 28027-1500

2. **FEC IDENTIFICATION NUMBER** C C00504522 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT
NC 08

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 11 / 04 / 2014 in the State of NC
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 Shawn Kocher
Signature of Treasurer Shawn Kocher *[Electronically Filed]* Date 10 / 23 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Hudson 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)).... | 36901.66 | 1413408.72 |
| (b) Total Contribution Refunds (from Line 20(d)) | 1900 | 8500 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 35001.66 | 1404908.72 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 92478.21 | 875233.89 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 152 | 31546.97 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 92326.21 | 843686.92 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 564895.26 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 5000 | |

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

Hudson 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)..... | 19800.49 | 451293.37 |
| (ii) Unitemized..... | 2560.53 | 29688.37 |
| (iii) TOTAL of contributions from individuals ▶ | 22361.02 | 480981.74 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 14540.64 | 932426.98 |
| (d) The Candidate..... | 0 | 0 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 36901.66 | 1413408.72 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0 | 52415.04 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) All Other Loans..... | 0 | 0 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0 | 0 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 152 | 31546.97 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0 | 378.58 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 37053.66 | 1497749.31 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 43

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 92478.21 | 875233.89 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0 | 0 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) Of All Other Loans | 0 | 0 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0 | 0 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 2900 | 3900 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | -1000 | 4600 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 1900 | 8500 |
| 21. OTHER DISBURSEMENTS | 3000 | 136369.99 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 97378.21 | 1020103.88 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 625219.81 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 37053.66 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 662273.47 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 97378.21 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 564895.26 |

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Larry W. Hyatt

Mailing Address 3316 Meadow Bluff Drive

City State Zip Code
Charlotte NC 28226-1125

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

Name of Employer Occupation
Hyatt Gun Shop Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 07 | | | 2014 | | | |

Transaction ID : A-CF6293

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Samuel G. Morse

Mailing Address 4513 Connell Drive

City State Zip Code
Raleigh NC 27612-5601

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

Name of Employer Occupation
City Electric Supply Branch Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
335.86

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 08 | | | 2014 | | | |

Transaction ID : A-CF6324

Amount of Each Receipt this Period
25

online

C. Full Name (Last, First, Middle Initial)
H. O. Woltz III

Mailing Address 1373 Boggs Drive

City State Zip Code
Mount Airy NC 27030-2145

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

Name of Employer Occupation
Insteel Industries CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 10 | | | 2014 | | | |

Transaction ID : A-PIP143

Amount of Each Receipt this Period
1000

contribution

[MEMO ITEM]
Partnership Itemization Memo

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

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

525.00

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

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

FOR LINE NUMBER: PAGE 6 OF 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Michael L. Wilson

Mailing Address 2230 Hassell Place

City State Zip Code
Charlotte NC 28209-2224

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

Name of Employer Occupation
Johnston, Allison & Hord Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.49

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6341

Amount of Each Receipt this Period
250.49

B. Full Name (Last, First, Middle Initial)
George S. Dewey IV

Mailing Address 3141 Sharon Road

City State Zip Code
Charlotte NC 28211-2603

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

Name of Employer Occupation
Aston Properties President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF6297

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Patricia B. Hurley

Mailing Address 141 Ridgcrest Road

City State Zip Code
Asheboro NC 27203-5835

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

Name of Employer Occupation
State Of NC State Legislature

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6347

Amount of Each Receipt this Period
250

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

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

3100.49

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
David M. Powers

Mailing Address **PO Box 464**

City **Winston Salem** State **NC** Zip Code **27102-0464**

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

Name of Employer **RAI Services Co** Occupation **VP State Government Relations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6420

Amount of Each Receipt this Period
500
 online

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

Mailing Address **PO Box 19653**

City **Charlotte** State **NC** Zip Code **28219-9653**

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

Name of Employer **Steelfab Inc** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : A-CF6258

Amount of Each Receipt this Period
500
 online

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

Mailing Address **6800 Newhall Road**

City **Charlotte** State **NC** Zip Code **28270-6072**

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

Name of Employer **Wells Fargo** Occupation **Operational Risk Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **775**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : A-CF6257

Amount of Each Receipt this Period
525
 online

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1525.00 |
| TOTAL This Period (last page this line number only)..... | |

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Sam F. Khashman

Mailing Address 4516 Piper Glen Drive

City Charlotte State NC Zip Code 28277-0367

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

Name of Employer Technology Partners Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : A-CF6255

Amount of Each Receipt this Period
 2600
 online

B. Full Name (Last, First, Middle Initial)
Steven J. Ellis

Mailing Address 544 N Church Street

City Charlotte State NC Zip Code 28202-2208

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

Name of Employer Wells Fargo Securities, LLC Occupation Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF6290

Amount of Each Receipt this Period
 2600

C. Full Name (Last, First, Middle Initial)
John J. Cooper

Mailing Address 329 Baytree Lane

City Raleigh State NC Zip Code 27615-1608

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

Name of Employer Compass NC Occupation Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6346

Amount of Each Receipt this Period
 500

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: PAGE 9 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Michael D. Smith

Mailing Address 2520 Hampton Avenue

City State Zip Code
Charlotte NC 28207-2520

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

Name of Employer Occupation
Collett RE Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6338

Amount of Each Receipt this Period
1000

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

Mailing Address 601 N Pearl Street

City State Zip Code
Pageland SC 29728-1628

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

Name of Employer Occupation
C.M. Tucker Lumber Companies Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : A-CF6328

Amount of Each Receipt this Period
250
online

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

Mailing Address PO Box 12272

City State Zip Code
Charlotte NC 28220-2272

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

Name of Employer Occupation
Wells Fargo Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6342

Amount of Each Receipt this Period
75

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

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

1325.00

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
John A. Bishop

Mailing Address **PO Box 210**

City **Kannapolis** State **NC** Zip Code **28082-0210**

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

Name of Employer **Hygeia Health Services** Occupation **Administrator/President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : A-CF6299

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Betty Kay Vaughn

Mailing Address **495 Crossingham Road**

City **Mount Airy** State **NC** Zip Code **27030-9169**

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 **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : A-PIP140

Amount of Each Receipt this Period
250

contribution

[MEMO ITEM]
Partnership Itemization Memo

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

Mailing Address **2700 Inverness Road**

City **Charlotte** State **NC** Zip Code **28209-3602**

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

Name of Employer **Self** Occupation **Real Estate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6351

Amount of Each Receipt this Period
250

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: (check only one) | PAGE 11 OF 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
James Richard Worrell Jr.

Mailing Address 2423 Beretania Circle

City State Zip Code
Charlotte NC 28211-3631

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

Name of Employer Occupation
Northwestern Mutual Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF6298

Amount of Each Receipt this Period
250

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

Mailing Address 412 Whitestone Road

City State Zip Code
Charlotte NC 28270-5342

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

Name of Employer Occupation
Bodwell and Associates President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6424

Amount of Each Receipt this Period
100

online

C. Full Name (Last, First, Middle Initial)
A. Wellford Tabor

Mailing Address 2820 Selwyn Avenue
Suite 550

City State Zip Code
Charlotte NC 28209-2763

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

Name of Employer Occupation
Keeneland Capital Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : A-CF6325

Amount of Each Receipt this Period
1000

online

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

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

1350.00

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
David H. Rankin Jr.

Mailing Address 15239 Elena Drive

City Charlotte State NC Zip Code 28278-7413

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 **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6331

Amount of Each Receipt this Period
1700

B. Full Name (Last, First, Middle Initial)
Robert G. Biggers

Mailing Address 5705 Bentway Drive

City Charlotte State NC Zip Code 28226-8057

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

Name of Employer Morgan Stanley Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6344

Amount of Each Receipt this Period
575

C. Full Name (Last, First, Middle Initial)
Meredith W. Sharp

Mailing Address 1200 Linden Place NE

City Washington State DC Zip Code 20002-4455

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

Name of Employer Self Occupation Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6419

Amount of Each Receipt this Period
500
 online

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

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

2775.00

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Charles W. Collier III

Mailing Address 1900 Beverly Drive

City State Zip Code
Charlotte NC 28207-2518

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

Name of Employer Occupation
Trinity Capital Advisors Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 15 | | 2014 |

Transaction ID : A-CF6350

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Ravi C. Patel

Mailing Address 5924 Old Well House Road

City State Zip Code
Charlotte NC 28226-2669

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

Name of Employer Occupation
SREE Hotels President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 15 | | 2014 |

Transaction ID : A-CF6337

Amount of Each Receipt this Period
500

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

Mailing Address 5104 Ocean Front Avenue

City State Zip Code
Virginia Beach VA 23451-2339

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

Name of Employer Occupation
ECPI University Education Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 15 | | 2014 |

Transaction ID : A-CF6417

Amount of Each Receipt this Period
500
online

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

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

3000.00

19800.49

**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 43 |
| | <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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Build Political Action Committee Of The National Association Of Home Builders (BUILDPAC)

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF6296

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
North Carolina Soybean Producers Association NC SOYPAC

Mailing Address 211 E Six Forks Road Suite 102

City Raleigh State NC Zip Code 27609-7743

FEC ID number of contributing federal political committee. **C** C00491456

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4500

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6340

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
New Frontier PAC

Mailing Address 135 Briarwood Place

City Wake Forest State NC Zip Code 27587-4679

FEC ID number of contributing federal political committee. **C** C00529685

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF6447

Amount of Each Receipt this Period
 0

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

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
New Frontier PAC

Mailing Address 135 Briarwood Place

City State Zip Code
Wake Forest NC 27587-4679

FEC ID number of contributing federal political committee. **C C00529685**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 15 2014

Transaction ID : A-CF6335

Amount of Each Receipt this Period
10

B. Full Name (Last, First, Middle Initial)
Wellpoint, Inc. WELLPAC

Mailing Address 120 Monument Circle

City State Zip Code
Indianapolis IN 46204-4906

FEC ID number of contributing federal political committee. **C C00197228**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 07 2014

Transaction ID : A-CF6294

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Charlotte-Mecklenburg Hospital Authority/Carolinas Healthcare System Employees Fed PAC

Mailing Address PO Box 32861

City State Zip Code
Charlotte NC 28232-2861

FEC ID number of contributing federal political committee. **C C00423871**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 07 2014

Transaction ID : A-CF6295

Amount of Each Receipt this Period
5000

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

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

6010.00

**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 43 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Marathon Oil Company Employees Political Action Committee (MEPAC)

Mailing Address **5555 San Felipe Street
Suite 4148**
City **Houston** State **TX** Zip Code **77056-2768**

FEC ID number of contributing federal political committee. **C C00040568**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6339

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Committee For/Adv Of SE Cotton (CASC) Southern Cottongrowers Inc Assn

Mailing Address **139 Prominence Court
Suite 110**
City **Dawsonville** State **GA** Zip Code **30534-8940**

FEC ID number of contributing federal political committee. **C C00300426**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **8500**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : A-CF6320

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
Richard Hudson NC Victory Committee

Mailing Address **PO Box 97275**
City **Raleigh** State **NC** Zip Code **27624-7275**

FEC ID number of contributing federal political committee. **C C00564526**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **6487.92**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF6358

Amount of Each Receipt this Period
1530.64

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

| | |
|---|-----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 4030.64 |
| TOTAL This Period (last page this line number only)..... | 14540.64 |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. The Stewart Group | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address PO Box 26508 | | Amount of Each Disbursement this Period 13975.5 |
| City Raleigh | State NC | Zip Code 27611-6508 |
| Purpose of Disbursement printing | Category/Type 001 | |
| Candidate Name | Transaction ID : B-E-6365 | |
| 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. Ristorante Tosca | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014 |
| Mailing Address 1112 F Street NW | | Amount of Each Disbursement this Period 254.3 |
| City Washington | State DC | Zip Code 20004-1308 |
| Purpose of Disbursement food | Category/Type 001 | |
| Candidate Name | Transaction ID : B-E-6165 | |
| 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. The Stewart Group | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address PO Box 26508 | | Amount of Each Disbursement this Period 9332.4 |
| City Raleigh | State NC | Zip Code 27611-6508 |
| Purpose of Disbursement printing | Category/Type 001 | |
| Candidate Name | Transaction ID : B-E-6364 | |
| 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)..... | 23562.20 |
| 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 18 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 182 Howard Street # 8 | | Amount of Each Disbursement this Period 23.15 Transaction ID : B-E-6174 |
| City San Francisco State CA Zip Code 94105-1611 | Purpose of Disbursement taxi Category/Type 001 | |
| 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. Edward B. Moore | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 4007 Quintessa Drive | | Amount of Each Disbursement this Period 588 Transaction ID : B-E-6206 |
| City Weddington State NC Zip Code 28104-6239 | Purpose of Disbursement door knocker Category/Type 001 | |
| 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. Salamander Resort | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 500 N Pendleton Street | | Amount of Each Disbursement this Period 25 Transaction ID : B-E-6309 |
| City Middleburg State VA Zip Code 20117-2683 | Purpose of Disbursement hotel-Billing error by hotel; to be refunded Category/Type 001 | |
| 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)..... | 636.15 |
| 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 43 | | | |
| | <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)
Hudson for Congress

| | | | |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. Employment Security Commission of North Carolina | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address PO Box 26504 | | | Amount of Each Disbursement this Period 190.92 Transaction ID : B-E-6183 |
| City Raleigh | State NC | Zip Code 27611-6504 | |
| Purpose of Disbursement payroll tax | | Category/ Type 001 | |
| 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 Stewart Group | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address PO Box 26508 | | | Amount of Each Disbursement this Period 269.41 Transaction ID : B-E-6363 |
| City Raleigh | State NC | Zip Code 27611-6508 | |
| Purpose of Disbursement printing | | Category/ Type 001 | |
| 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. Michael D. Patterson | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 7117 Winding Cedar Trail | | | Amount of Each Disbursement this Period 252 Transaction ID : B-E-6199 |
| City Harrisburg | State NC | Zip Code 28075-6688 | |
| Purpose of Disbursement door knocker | | Category/ Type 001 | |
| 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)..... | 712.33 |
| 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 43 | | |
| | <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)
Hudson for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Aristotle International, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 1950 Transaction ID : B-E-6033 |
| City Washington State DC Zip Code 20003-1164 | Purpose of Disbursement BO Candidate Name Category/Type 001 | |
| 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. Ian Newbury | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 205 N Main Street | | Amount of Each Disbursement this Period 210 Transaction ID : B-E-6203 |
| City Wingate State NC Zip Code 28174-8287 | Purpose of Disbursement door knocker Candidate Name Category/Type 001 | |
| 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. Jacob A. Jamison | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 220 N Camden Road | | Amount of Each Disbursement this Period 252 Transaction ID : B-E-6204 |
| City Wingate State NC Zip Code 28174-9644 | Purpose of Disbursement door knocker Candidate Name Category/Type 001 | |
| 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)..... | 2412.00 |
| 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 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. TLF Flowers | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 231 Branchview Drive NE Suite D | | Amount of Each Disbursement this Period 116 Transaction ID : B-E-6266 |
| City Concord | State NC | |
| Zip Code 28025-3488 | Purpose of Disbursement flowers | Category/ Type 001 |
| 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. Pinnacle List Company | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 2800 S Shirlington Road Suite 970 | | Amount of Each Disbursement this Period 1927.86 Transaction ID : B-E-6196 |
| City Arlington | State VA | |
| Zip Code 22206-3613 | Purpose of Disbursement postage | Category/ Type 001 |
| 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. Northstar Campaign Systems, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 2626 Harney Street | | Amount of Each Disbursement this Period 345.88 Transaction ID : B-E-6189 |
| City Omaha | State NE | |
| Zip Code 68131-3621 | Purpose of Disbursement advertising | Category/ Type 001 |
| 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)..... | 2389.74 |
| 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 22 OF 43 | |
| | <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)
Hudson for Congress

A. Target

Full Name (Last, First, Middle Initial)
Mailing Address 6150 Bayfield Parkway

City Concord State NC Zip Code 28027-7486

Purpose of Disbursement food

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2014

Amount of Each Disbursement this Period: 52.42

Transaction ID : B-E-6181

Category/Type: 001

B. The Stewart Group

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 26508

City Raleigh State NC Zip Code 27611-6508

Purpose of Disbursement printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2014

Amount of Each Disbursement this Period: 13975.5

Transaction ID : B-E-6367

Category/Type: 001

c. US Airways

Full Name (Last, First, Middle Initial)
Mailing Address 4000 E Sky Harbor Boulevard

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement flight

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2014

Amount of Each Disbursement this Period: 34

Transaction ID : B-E-6170

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 14061.92

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 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Park Lane Hotel | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 3005 High Point Road | | Amount of Each Disbursement this Period 416.14 Transaction ID : B-E-6267 |
| City Greensboro State NC Zip Code 27403-3637 | Purpose of Disbursement hotel 001 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. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 4000 E Sky Harbor Boulevard | | Amount of Each Disbursement this Period 422.7 Transaction ID : B-E-6265 |
| City Phoenix State AZ Zip Code 85034-3802 | Purpose of Disbursement flight 001 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. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 6000 Transaction ID : B-E-6186 |
| City Columbia State SC Zip Code 29202-7431 | Purpose of Disbursement ad 001 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)..... | 6838.84 |
| 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 43 | | | |
| | <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)
Hudson for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. FedEx | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address 1215 Concord Parkway N | | Amount of Each Disbursement this Period 23.84 Transaction ID : B-E-6268 |
| City Concord | State NC | |
| Purpose of Disbursement shipping | | Category/ Type 001 |
| 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. Holiday Inn | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 230 N College Street | | Amount of Each Disbursement this Period 316.16 Transaction ID : B-E-6310 |
| City Charlotte | State NC | |
| Purpose of Disbursement hotel | | Category/ Type 001 |
| 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. UPS Store | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 13016 Eastfield Road | | Amount of Each Disbursement this Period 40.41 Transaction ID : B-E-6318 |
| City Huntersville | State NC | |
| Purpose of Disbursement shipping | | Category/ Type 001 |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 380.41 |
| 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 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Salamander Resort | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 500 N Pendleton Street | | Amount of Each Disbursement this Period 16.5 Transaction ID : B-E-6311 |
| City Middleburg State VA Zip Code 20117-2683 | Purpose of Disbursement hotel-Billing error by hotel; to be refunded 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: | |
| Category/Type 001 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Capitol Hill Club | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 1135.14 Transaction ID : B-E-6191 |
| City Washington State DC Zip Code 20003-1801 | Purpose of Disbursement food 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: | |
| Category/Type 001 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 2500 Transaction ID : B-E-6148 |
| City Columbia State SC Zip Code 29202-7431 | Purpose of Disbursement retainer 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: | |
| Category/Type 001 | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 3651.64 |
| TOTAL This Period (last page this line number only) | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Exxon Mobile | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 1110 Union Street S | | Amount of Each Disbursement this Period 93.5 Transaction ID : B-E-6307 |
| City Concord | State NC | |
| Zip Code 28025-5808 | Purpose of Disbursement gas | Category/ Type 001 |
| 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. O3 Strategies, Inc | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address PO Box 25363 | | Amount of Each Disbursement this Period 50 Transaction ID : B-E-6188 |
| City Raleigh | State NC | |
| Zip Code 27611-5363 | Purpose of Disbursement website | Category/ Type 001 |
| 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. James H. Blohm | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 7156 Winery Lane | | Amount of Each Disbursement this Period 700 Transaction ID : B-E-6202 |
| City Charlotte | State NC | |
| Zip Code 28227-8114 | Purpose of Disbursement door knocker | Category/ Type 001 |
| 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: | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 843.50 |
| 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 27 OF 43 | |
| | <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)
Hudson for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Metro Mailing & Printing Company | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 109 Winona Street | | Amount of Each Disbursement this Period 669.21 |
| City Charlotte | State NC | Zip Code 28203-4149 |
| Purpose of Disbursement printing | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-E-6192 | |
| 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. Krystal M Kocher | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address 508 Geary Street NW | | Amount of Each Disbursement this Period 496.84 |
| City Concord | State NC | Zip Code 28027-8210 |
| Purpose of Disbursement payroll | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-E-6323 | |
| 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. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 4000 E Sky Harbor Boulevard | | Amount of Each Disbursement this Period 426.1 |
| City Phoenix | State AZ | Zip Code 85034-3802 |
| Purpose of Disbursement flight | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-E-6175 | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1592.15 |
| 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 28 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Matthew B. Ezzell | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 220 N Camden Road | | Amount of Each Disbursement this Period 420 Transaction ID : B-E-6207 |
| City Wingate | State NC Zip Code 28174-9644 | |
| Purpose of Disbursement door knocker | Category/Type 001 | |
| 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. William Baldwin | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 811 Woodbrook Drive | | Amount of Each Disbursement this Period 1590.51 Transaction ID : B-E-6314 |
| City Greensboro | State NC Zip Code 27410-3279 | |
| Purpose of Disbursement payroll | Category/Type 001 | |
| 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. Salamander Resort | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 500 N Pendleton Street | | Amount of Each Disbursement this Period 1025.5 Transaction ID : B-E-6312 |
| City Middleburg | State VA Zip Code 20117-2683 | |
| Purpose of Disbursement hotel-Billing error by hotel; to be refunded | Category/Type 001 | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3036.01 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address 182 Howard Street # 8 | | Amount of Each Disbursement this Period 24 Transaction ID : B-E-6270 |
| City San Francisco State CA Zip Code 94105-1611 | Purpose of Disbursement taxi 001 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. Intuit | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 2632 Marine Way | | Amount of Each Disbursement this Period 39.95 Transaction ID : B-E-6313 |
| City Mountain View State CA Zip Code 94043-1126 | Purpose of Disbursement QB 001 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. William Baldwin | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 811 Woodbrook Drive | | Amount of Each Disbursement this Period 162 Transaction ID : B-E-6179 |
| City Greensboro State NC Zip Code 27410-3279 | Purpose of Disbursement mileage 001 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 225.95 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 30 OF 43 | |
| | <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)
Hudson for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address 10156 Perkins Rowe Suite 311F | | Amount of Each Disbursement this Period 151.64 Transaction ID : B-E-6261 |
| City Baton Rouge State LA Zip Code 70810-1799 | Purpose of Disbursement cc fees Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Benchmark Email.com | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 10621 Calle Lee Suite 141 | | Amount of Each Disbursement this Period 28.95 Transaction ID : B-E-6306 |
| City Los Alamitos State CA Zip Code 90720-6798 | Purpose of Disbursement email Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. MDI Imaging & Mail, LLC | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 21955 Cascades Parkway | | Amount of Each Disbursement this Period 4242.98 Transaction ID : B-E-6195 |
| City Dulles State VA Zip Code 20166-9211 | Purpose of Disbursement postage Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 4423.57 |
| 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 31 OF 43 | | | |
| | <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)
Hudson for Congress

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Internal Revenue Service | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 | | |
| Mailing Address 10715 David Taylor Drive | | | Amount of Each Disbursement this Period 1354.98 | | |
| City Charlotte | State NC | Zip Code 28262-1283 | Transaction ID : B-E-6184 | | |
| Purpose of Disbursement payroll tax | | Category/ Type 001 | | | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | | | |
|--|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. UPS Store | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 | | |
| Mailing Address 13016 Eastfield Road | | | Amount of Each Disbursement this Period 29.3 | | |
| City Huntersville | State NC | Zip Code 28078-6622 | Transaction ID : B-E-6180 | | |
| Purpose of Disbursement shipping | | Category/ Type 001 | | | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) c. Regi Simpson | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 | | |
| Mailing Address 455 S Hawthorne Road | | | Amount of Each Disbursement this Period 102.37 | | |
| City Winston Salem | State NC | Zip Code 27103-3784 | Transaction ID : B-E-6322 | | |
| Purpose of Disbursement mileage | | Category/ Type 001 | | | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1486.65 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 182 Howard Street # 8 | | Amount of Each Disbursement this Period 71 Transaction ID : B-E-6177 |
| City San Francisco State CA Zip Code 94105-1611 | Purpose of Disbursement taxi 001 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. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014 |
| Mailing Address 368 George W Liles Parkway NW | | Amount of Each Disbursement this Period 36 Transaction ID : B-E-6163 |
| City Concord State NC Zip Code 28027-2406 | Purpose of Disbursement payroll fee 001 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. Thomas E. Wall | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address PO Box 1038 | | Amount of Each Disbursement this Period 588 Transaction ID : B-E-6200 |
| City Norwood State NC Zip Code 28128-1038 | Purpose of Disbursement door knocker 001 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 695.00 |
| 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 33 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. USPS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address 455 Concord Parkway N | | Amount of Each Disbursement this Period 9.8 Transaction ID : B-E-6269 |
| City Concord | State NC | |
| Zip Code 28027-6736 | Purpose of Disbursement postage | Category/ Type 001 |
| 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. Holiday Inn | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 230 N College Street | | Amount of Each Disbursement this Period 79.04 Transaction ID : B-E-6308 |
| City Charlotte | State NC | |
| Zip Code 28202-2112 | Purpose of Disbursement hotel | Category/ Type 001 |
| 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. Reid Political Consulting, LLC | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 3502 Halcyon Drive | | Amount of Each Disbursement this Period 16407.14 Transaction ID : B-E-6187 |
| City Alexandria | State VA | |
| Zip Code 22305-1330 | Purpose of Disbursement fundraising | Category/ Type 001 |
| 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)..... | 16495.98 |
| 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 34 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 4000 E Sky Harbor Boulevard | | Amount of Each Disbursement this Period 492.6 Transaction ID : B-E-6262 |
| City Phoenix | State AZ Zip Code 85034-3802 | |
| Purpose of Disbursement flight | Category/Type 001 | |
| 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 / 03 / 2014 |
| Mailing Address 182 Howard Street # 8 | | Amount of Each Disbursement this Period 28 Transaction ID : B-E-6176 |
| City San Francisco | State CA Zip Code 94105-1611 | |
| Purpose of Disbursement taxi | Category/Type 001 | |
| 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. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 4000 E Sky Harbor Boulevard | | Amount of Each Disbursement this Period 15 Transaction ID : B-E-6264 |
| City Phoenix | State AZ Zip Code 85034-3802 | |
| Purpose of Disbursement flight | Category/Type 001 | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 535.60 |
| 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 35 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 4000 E Sky Harbor Boulevard | | Amount of Each Disbursement this Period 56 Transaction ID : B-E-6263 |
| City Phoenix | State AZ Zip Code 85034-3802 | |
| Purpose of Disbursement flight | Category/Type 001 | |
| 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. Metro Mailing & Printing Company | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 109 Winona Street | | Amount of Each Disbursement this Period 162.68 Transaction ID : B-E-6211 |
| City Charlotte | State NC Zip Code 28203-4149 | |
| Purpose of Disbursement postage | Category/Type 001 | |
| 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: | | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) c. Cody L. Huneycutt | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 107 Stanly Street | | Amount of Each Disbursement this Period 976.5 Transaction ID : B-E-6201 |
| City Albemarle | State NC Zip Code 28001-5437 | |
| Purpose of Disbursement door knocker | Category/Type 001 | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1195.18 |
| 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 36 OF 43 | |
| | <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)
Hudson for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 182 Howard Street # 8 | | Amount of Each Disbursement this Period 59 Transaction ID : B-E-6173 |
| City San Francisco | State CA Zip Code 94105-1611 | |
| Purpose of Disbursement taxi | Category/Type 001 | |
| 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. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address 10156 Perkins Rowe Suite 311F | | Amount of Each Disbursement this Period 65.36 Transaction ID : B-E-6330 |
| City Baton Rouge | State LA Zip Code 70810-1799 | |
| Purpose of Disbursement cc fees | Category/Type 001 | |
| 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. NC Department of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address PO Box 25000 | | Amount of Each Disbursement this Period 224 Transaction ID : B-E-6182 |
| City Raleigh | State NC Zip Code 27640-0640 | |
| Purpose of Disbursement payroll tax | Category/Type 001 | |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 348.36 |
| 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 37 OF 43 | | | |
| | <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)
Hudson for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. The Stewart Group | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address PO Box 26508 | | Amount of Each Disbursement this Period 1914.03 Transaction ID : B-E-6366 |
| City Raleigh | State NC Zip Code 27611-6508 | |
| Purpose of Disbursement printing | Category/Type 001 | |
| 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. USPS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address 455 Concord Parkway N | | Amount of Each Disbursement this Period 304 Transaction ID : B-E-6379 |
| City Concord | State NC Zip Code 28027-6736 | |
| Purpose of Disbursement postage | Category/Type 001 | |
| 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. Chick-Fil-A | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 8020 Concord Mills Boulevard | | Amount of Each Disbursement this Period 15.7 Transaction ID : B-E-6317 |
| City Concord | State NC Zip Code 28027-4417 | |
| Purpose of Disbursement food | Category/Type 001 | |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2233.73 |
| 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 38 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Amtrak | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 1914 N Tryon Street | | Amount of Each Disbursement this Period 152 Transaction ID : B-E-6168 |
| City Charlotte | State NC | |
| Zip Code 28206-2734 | Purpose of Disbursement train | Category/ Type 001 |
| 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. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 2000 Transaction ID : B-E-6193 |
| City Columbia | State SC | |
| Zip Code 29202-7431 | Purpose of Disbursement ad | Category/ Type 001 |
| 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. Patrick C Carter | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 1506 Pepper Hill Road | | Amount of Each Disbursement this Period 66.88 Transaction ID : B-E-6190 |
| City Greensboro | State NC | |
| Zip Code 27407-4043 | Purpose of Disbursement mileage | Category/ Type 001 |
| 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)..... | 2218.88 |
| 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 39 OF 43 | | |
| | <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)
Hudson for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Chick-Fil-A | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 8020 Concord Mills Boulevard | | Amount of Each Disbursement this Period 31.17 |
| City Concord | State NC | |
| Zip Code 28027-4417 | Purpose of Disbursement food | Transaction ID : B-E-6316 |
| Candidate Name | 001 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. Hilltop Fish Fare & Steakhouse | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 1602 E Roosevelt Boulevard | | Amount of Each Disbursement this Period 1525.46 |
| City Monroe | State NC | |
| Zip Code 28112-4017 | Purpose of Disbursement food | Transaction ID : B-E-6194 |
| Candidate Name | 001 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. | | 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1556.63 |
| TOTAL This Period (last page this line number only)..... | 91532.42 |

**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 40 OF 43 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
Hudson for Congress

| | | | | |
|---|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. The Strategy Group Company | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 | |
| Mailing Address 7669 Stagers Loop | | | Amount of Each Disbursement this Period 2900 | |
| City Delaware | State OH | Zip Code 43015-7010 | Transaction ID : B-E-6303 | |
| Purpose of Disbursement teleforum | | 010 Category/ Type | | |
| Candidate Name | | | | |
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 | | |
| State: District: | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | | | |
|--|---|--|---|--|
| 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 | | Category/ Type | | |
| Candidate Name | | | | |
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | | |
| State: District: | | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

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

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| SUBTOTAL of Disbursements This Page (optional)..... | 2900.00 |
| TOTAL This Period (last page this line number only)..... | 2900.00 |

**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 41 OF 43 | |
| | <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)
Hudson for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Elise For Congress | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address PO Box 338 | | Amount of Each Disbursement this Period -1000 Transaction ID : B-E-6291 |
| City Willsboro State NY Zip Code 12996-0338 | Purpose of Disbursement refund for excessive contribution Candidate Name Category/Type 010 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | -1000.00 |
| TOTAL This Period (last page this line number only)..... | -1000.00 |

**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 42 OF 43 |
| | <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)
Hudson for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Trott For Congress, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 2085 E West Maple Road Suite A-101 | | Amount of Each Disbursement this Period 1000 Transaction ID : B-E-6153 |
| City Commerce Township | State MI Zip Code 48390-3802 | |
| Purpose of Disbursement contribution | 011 Category/Type | |
| Candidate Name David A. Trott | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MI District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Lynn Jenkins For Congress | | Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014 |
| Mailing Address PO Box 1441 | | Amount of Each Disbursement this Period 2000 Transaction ID : B-E-6304 |
| City Topeka | State KS Zip Code 66601-1441 | |
| Purpose of Disbursement contribution | 011 Category/Type | |
| Candidate Name Lynn Jenkins | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: KS District: 02 | | |

| | | |
|--|--|---|
| 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 contribution | 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)..... | 3000.00 |
| TOTAL This Period (last page this line number only)..... | 3000.00 |

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

NAME OF COMMITTEE (In Full)
Hudson for Congress

| | | |
|--|------------|---------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc. | | Nature of Debt (Purpose): BO |
| Mailing Address 205 Pennsylvania Avenue SE | | |
| City State | Zip Code | |
| Washington DC | 20003-1164 | |

| | | |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10-DEBT6033 | |
| <input type="text" value="1950"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="0"/> | <input type="text" value="1950"/> | <input type="text" value="0"/> |

| | | |
|---|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reid Political Consulting, LLC | | Nature of Debt (Purpose): Performance Bonus |
| Mailing Address 3502 Halcyon Drive | | |
| City State | Zip Code | |
| Alexandria VA | 22305-1330 | |

| | | |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10-DEBT3260 | |
| <input type="text" value="5000"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="0"/> | <input type="text" value="0"/> | <input type="text" value="5000"/> |

| | | |
|---|------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Push Digital | | Nature of Debt (Purpose): retainer |
| Mailing Address PO Box 7431 | | |
| City State | Zip Code | |
| Columbia SC | 29202-7431 | |

| | | |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10-DEBT6148 | |
| <input type="text" value="2500"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="0"/> | <input type="text" value="2500"/> | <input type="text" value="0"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional) | <input type="text" value="5000.00"/> |
| 2) TOTALS This Period (last page this line number only) | <input type="text" value="5000.00"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text" value="0.00"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="5000.00"/> |