

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

ADDRESS (number and street) ▼

211 SIX FORKS ROAD SUITE 102

☐ Check if different than previously reported. (ACC)

RALEIGH

NC

27609

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00491456

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
☐ Termination Report (TER)

- (b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

- (c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
PRE-Election Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

- (d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
POST-Election Report for the:

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 01 2014 through M M M / D D D / Y Y Y Y Y Y 03 31 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 Mr. Charles S. Hall

Signature of Treasurer

Mr. Charles S. Hall

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y 04 01 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.

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="24707.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24707.54"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="14850.00"/>	<input type="text" value="14850.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="39557.54"/>	<input type="text" value="39557.54"/>
7. Total Disbursements (from Line 31)	<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="37057.54"/>	<input type="text" value="37057.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

10200.00

10200.00

(ii) Unitemized

2450.00

2450.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

12650.00

12650.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1200.00

1200.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

13850.00

13850.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

1000.00

1000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

14850.00

14850.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

14850.00

14850.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2500.00	2500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	2500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13850.00	13850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13850.00	13850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Amy L. Alderson

Mailing Address PO Box 70

City

Keeling

State

VA

Zip Code

24566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5448

Amount of Each Receipt this Period

600.00

Sporting Clays

Full Name (Last, First, Middle Initial)

B. Timothy D. Alderson

Mailing Address PO Box 70

City

Keeling

State

VA

Zip Code

24566

FEC ID number of contributing
federal political committee.

C

Name of Employer

FarmPlus Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5493

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

C. Graham H. Ashe

Mailing Address 4828 Latimer Road

City

Raleigh

State

NC

Zip Code

27609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Learfield Sports

Occupation

Sports Sponsorship Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11AI.5452

Amount of Each Receipt this Period

600.00

Sporting Clays Tournament

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

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

1800.00

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

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

FOR LINE NUMBER:
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PAGE 7 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Andy Bland

Mailing Address 2160 Jonestown Road

City State Zip Code
Dover NC 28526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

B. Joe L. Dupree

Mailing Address 10987 Hwy. 258 N

City State Zip Code
Tarboro NC 27886

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Parkway Ag

Agronomist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5486

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

C. Randy Edwards

Mailing Address 2505 Wendell Road

City State Zip Code
Wendell NC 27591

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5476

Amount of Each Receipt this Period

1200.00

Tournament

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

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

2400.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 8 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Fleming Brothers Farms

Mailing Address 1419 Moonlight Road

City State Zip Code
 Halifax NC 27839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 14 / 2014

Transaction ID : SA11AI.5458

Amount of Each Receipt this Period

600.00

Sporting Clays Tournament

Full Name (Last, First, Middle Initial)

B. Mr. John Fleming

Mailing Address 1419 Moonlight Road

City State Zip Code
 Halifax NC 27839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 14 / 2014

Transaction ID : SA11AI.5458.0

Amount of Each Receipt this Period

300.00

Tournament

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Mr. Rob Fleming

Mailing Address 5043 River Road

City State Zip Code
 Scotland Neck NC 27874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

03 / 14 / 2014

Transaction ID : SA11AI.5458.1

Amount of Each Receipt this Period

300.00

Tournament

[MEMO ITEM]

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

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

600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Donald Ray Jernigan

Mailing Address 468 NC 305 Highway

City
Woodland

State Zip Code
NC 27897

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5484

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

B. Mr. Adam S. Lassiter

Mailing Address 442 Jenkins Mill

City
Conway

State Zip Code
NC 27820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Transaction ID : SA11AI.5447

Amount of Each Receipt this Period

600.00

Sporting Clays

Full Name (Last, First, Middle Initial)

C. Mr. Donny Lassiter

Mailing Address 1822 Lasker Road

City
Conway

State Zip Code
NC 27820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5460

Amount of Each Receipt this Period

400.00

Contribution

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

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

1600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Renee McPherson

Mailing Address 3600 Mebane Oaks Road

City State Zip Code
Mebane NC 27302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5491

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

B. Ben Moses Jr.

Mailing Address 2065 Dusty Hill Road

City State Zip Code
Conway NC 27820-9683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5485

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

c. Chris G. Register

Mailing Address 209 E Church Rd.

City State Zip Code
New Bern NC 28562

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Insurance Agent/Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.5488

Amount of Each Receipt this Period

600.00

Tournament

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

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

1800.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. Strickland Farming Partnership

Mailing Address 671 Hollingsworth Road

City State Zip Code
 Mount Olive NC 28365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5470

Amount of Each Receipt this Period

1800.00

Tournament

Full Name (Last, First, Middle Initial)

B. Mr. Reggie Strickland

Mailing Address 671 Hollingsworth Road

City State Zip Code
 Mt. Olive NC 28365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5470.0

Amount of Each Receipt this Period

600.00

Tournament

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. L.H. Strickland

Mailing Address 671 Hollingsworth Road

City State Zip Code
 Mount Olive NC 28365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Deland R. Hill and Associates

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5470.1

Amount of Each Receipt this Period

600.00

Tournament

[MEMO ITEM]

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

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

1800.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. G.S. Strickland

Mailing Address 671 Hollingsworth Road

City State Zip Code
 Mount Olive NC 28365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5470.2

Amount of Each Receipt this Period

600.00

Tournament

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mr. Jeff Tyson

Mailing Address 5207 Rose Loop Road

City State Zip Code
 Nashville NC 27856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5492

Amount of Each Receipt this Period

200.00

Donation

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

200.00

10200.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. NORTH CAROLINA COTTON PRODUCERS ASSOCIATION COMMITTEE (NCCPAC)

Mailing Address POST OFFICE BOX 656

City State Zip Code
NASHVILLE NC 27856

FEC ID number of contributing
federal political committee.

C C00416297

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / **06** / **2014**

Transaction ID : SA11C.5451

Amount of Each Receipt this Period

600.00

Sporting Clays Tournament

Full Name (Last, First, Middle Initial)

B. NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Mailing Address 5301 GLENWOOD AVENUE

City State Zip Code
RALEIGH NC 27612

FEC ID number of contributing
federal political committee.

C C00216754

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / **21** / **2014**

Transaction ID : SA11C.5483

Amount of Each Receipt this Period

600.00

Tournament

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

1200.00

1200.00

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

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

FOR LINE NUMBER: PAGE 14 OF 15
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. MIKE MCINTYRE FOR CONGRESS

Mailing Address P.O. BOX 1

City State Zip Code
 LUMBERTON NC 28359

FEC ID number of contributing
federal political committee.

C C00306829

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / **17** / **2014**

Transaction ID : SA16.5446

Amount of Each Receipt this Period

1000.00

Contribution Refund (retiring)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

1000.00

1000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 15

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

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC

Full Name (Last, First, Middle Initial)

A. DAVID ROUZER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Mailing Address PO BOX 2267

City	State	Zip Code
SMITHFIELD	NC	27577

Transaction ID : SB23.5497Purpose of Disbursement
Campaign Contribution

Candidate Name

DAVID CHESTON ROUZERCategory/
Type

Amount of Each Disbursement this Period

2500.00

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NC	District: 07	

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

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 M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

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

2500.00

2500.00
