				PAGE 1 / 17
FEC A	EPORT OF I ND DISBUR	SEMENTS	045-05-11	
1. NAME OF T	/PE OR PRINT ▼	Example: If typing, typ	Office Us	
COMMITTEE (in full)		over the lines.	12FE4M5	
North Carolina Medical S	Society Federal Polit	ical Education and	Action Committee	
ADDRESS (number and street)	PO Box 25834			
▼ 、	222 N. Person Street			
Check if different than previously reported. (ACC)	Raleigh		NC 27611	
2. FEC IDENTIFICATION NUM		∕▲	STATE 🔺	ZIP CODE
C C00003152	3. IS RE	THIS X NEW PORT X (N)	OR AMENDED (A)	
 TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	Report Due On:	20 (M2) May 20 20 (M3) Jun 20		Nov 20 (M1: (Non-Election Year Only) Dec 20 (M1: (Non-Election Year Only)
× April 15	Apr 2	20 (M4) Jul 20	(M7) Oct 20 (M10)	Jan 31 (YE)
July 15	(C) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q3) January 31 Year-End Report (YE)	Election	on		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election	General (30G)	Runoff (30R)	Special (30S
Termination Report (TER)	Report for the:	on / D · ·		in the State of
. Covering Period	/ D D / Y Y Y 01 2014	Y through	M M / D D / Y Y 03 31 201	Y Y 4
certify that I have examined this	Report and to the best of r	ny knowledge and belief	t is true, correct and complet	ie.
Type or Print Name of Treasurer	Asst Treasurer Stephen W. K	leene		
Signature of Treasurer	asurer Stephen W. Keene	[Electronically Filed]	Date 04 / 08	
NOTE: Submission of false, erroneou	us, or incomplete information	may subject the person sig	ning this Report to the penaltie	es of 2 U.S.C. §437g.
Office Use Only				FORM 3X

04/08/2014 15 : 13

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

R	eport Covering the Period: From:	1 01 / Y Y Y Y Y 1 01 701 700	b: 03 / 0 - 0 / 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		45589.87
	(b) Cash on Hand at Beginning of Reporting Period	45589.87	
	(c) Total Receipts (from Line 19)	8408.05	8408.05
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	53997.92	53997.92
7.	Total Disbursements (from Line 31)	25000.00	25000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28997.92	28997.92
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

X

Image#	14960618	3635
mayom	1400010	,000

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

R	eport Covering the Period: From: 01	/ D D / Y Y Y Y 01 2014 To:	M M / D D / Y					
	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	5000.00	5000.00					
	(i) Itemized (use Schedule A)	5000.00	5000.00					
			0.405.00					
	(ii) Unitemized	3405.00	3405.00					
	(iii) TOTAL (add	0405.00	8405.00					
	Lines 11(a)(i) and (ii)▶	7 7 8405.00	7 7 7 7 8405.00					
	(b) Political Party Committees	0.00	0.00					
	(b) Political Party Committees(c) Other Political Committees							
	(such as PACs)	0.00	0.00					
	(d) Total Contributions (add Lines							
	11(a)(iii), (b), and (c)) (Carry							
	Totals to Line 33, page 5)	8405.00	8405.00					
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	0.00	0.00					
17.	Other Federal Receipts		0.05					
10	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	3.05	3.05					
10.	(a) Non-Federal Account							
	(from Schedule H3)	0.00	0.00					
		7 7 7	0.00					
	(h) Louis Funda (from Cohodula LIF)	0.00	0.00					
	(b) Levin Funds (from Schedule H5)	7 7	7 7 7 0.00					
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
		7 7						
19	Total Receipts (add Lines 11(d),							
	12, 13, 14, 15, 16, 17, and 18(c))▶	8408.05	8408.05					
	-, ··, ··, ··, ··, ··, ··, ··, ··, ··, ·	7 7 7	7 7 7					
20.	Total Federal Receipts							
	(subtract Line 18(c) from Line 19)▶	8408.05	8408.05					

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.0
(b) Other Federal Operating Expenditures	0.00	0.0
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b)) ►	0.00	0.0
Committees	0.00	0.0
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	0.00	0.0
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.0
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.0
(a) Individuals/Persons Other Than Political Committees	0.00	0.0
(b) Political Party Committees	0.00	0.0
(c) Other Political Committees (such as PACs)	0.00	0.0
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.0
Other Disbursements	25000.00	25000.0
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.0
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.0
With Federal Funds	0.00	0.0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	25000.00	25000.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	25000.00	25000.00
	7 7	

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L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	8405.00	8405.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	8405.00	8405.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. 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

17

	Detailed Summary Page	X 11a 11b 11c 12											
		13 14 15 16 17											
or for commercial purposes, other that	ports and Statements may not be sold or used by any in using the name and address of any political committe												
NAME OF COMMITTEE (In Full)													
/	Society Federal Political Education and	d Action Committee											
Full Name (Last, First, Middle Initian, Dr. William Byron Barber II	al)	Date of Receipt											
Mailing Address 2020 Saint Andrew	vs Road	M M / D D / Y Y Y Y Y 03 17 _ 2014 _											
City	State Zip Code	Transaction ID : SA11AI.15517											
Greensboro	NC 27408-5812	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C	250.00											
Name of Employer	Occupation	Voluntary member contribution											
Barber Center of Plastic Surgery	Physician												
Receipt For:	Aggregate Year-to-Date ▼												
Primary General													
Other (specify)	250.00												
Full Name (Last, First, Middle Initia B. Jagadeesh R Ganji	al)	Date of Receipt											
Mailing Address 1002 N. Church S	traat												
Maning Address 1002 N. Church S	01 07 _2014 _												
City	State Zip Code	Transaction ID : SA11AI.15433											
Greensboro	NC 27401	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C	250.00											
Name of Employer	Occupation	Voluntary member contribution											
Piedmont Cardiovascular	Physician												
Receipt For:	Aggregate Year-to-Date ▼												
Primary General		_											
Other (specify) v	250.00												
Full Name (Last, First, Middle Initia C. Dr. Martin Thomas Gessi	Full Name (Last, First, Middle Initial) Dr. Martin Thomas Gessner												
Mailing Address 103 Medical Heig	Mailing Address 103 Medical Heights Drive												
City	State Zip Code	01 17 2014 Transaction ID : SA11AI.15442											
Morganton	NC 28655-5197	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C	250.00											
Name of Employer	Occupation	Voluntary member contribution											
Burke Primary Care, PLLC	Physician												
Receipt For:	Aggregate Year-to-Date ▼												
Other (specify) ▼	250.00												
SUBTOTAL of Receipts This Page (optional)	▶ 750.00											

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

SCHEDULE A (FEC Form 3X) FMIZED RECEIDTO

FOR LINE NUMBER:

(check only one)

PAGE

7 OF

17

TIEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any p sing the name and address of any political committe	person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) North Carolina Medical So	ciety Federal Political Education and	Action Committee					
Full Name (Last, First, Middle Initial) A. Mark D Harris Mailing Address 1710 South 17th Stree City Wilmington	t State Zip Code NC 28401	Date of Receipt					
FEC ID number of contributing federal political committee.	C	250.00 Voluntary member contribution					
Name of Employer Carolina Arthritis Assocs Receipt For:	Occupation Physician Aggregate Year-to-Date ▼ 250.00						
B. Full Name (Last, First, Middle Initial) David T. Jones Mailing Address 3410 Executive Drive Ste 103 City	Date of Receipt						
Raleigh FEC ID number of contributing federal political committee. Name of Employer Bone & Joint Surgery Receipt For: Primary General	NC 27609 C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 500.00 Voluntary member contribution					
C. Christian T Lige	500.00	Date of Receipt					
Mailing Address 100 East Dune Street City Nags Head FEC ID number of contributing federal political committee. Name of Employer Surf Pediatrics and Medicine	State Zip Code NC 27959	M M Z4 2014 Transaction ID : SA11AI.15449 Amount of Each Receipt this Period					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]					
SUBTOTAL of Receipts This Page (option	onal)	▶ 1250.00					

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

SCHEDULE A (FEC Form 3X) I

FOR LINE NUMBER:

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17

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(chec	,	/ on	e) 11b	11c		12					
			Detailed Summary Page		13		14	15		16	1	7			
Ar or	ny information copied from such Reports and a for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any pendotress of any political committee	erson for to solic	the t cor	purp ntribi	ose of utions t	solicitin	ig co ch co	ntribut	ions ee.				
\setminus	NAME OF COMMITTEE (In Full)		-		_		• · · ·								
	North Carolina Medical Society	Federal I	Political Education and	Actio	n Co	om	mitte	e							
<u>/</u>	Full Name (Last, First, Middle Initial)														
Α.				Da	ate of	Ree	ceipt								
	Mailing Address 530 West Webb Avenue						02 17 _ 2014 _								
	City	State	Zip Code		-	acti		SA11A							
	Burlington	NC	27217	An	nount	of I	Each F	Receipt t	his F	Period					
	FEC ID number of contributing federal political committee.	С					,	7		250.	.00]			
	Name of Employer	Occupation	1	- Vol	untar	y me	ember	contribut	tion						
	Burlington Pediatrics	Physician													
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		250.00												
В.	Full Name (Last, First, Middle Initial) Christopher R Myers			Da	ate of	Ree	ceipt								
	Mailing Address 8788 Tilbury Drive				01 21 2014										
	City	State	Zip Code	т		actio		SA11A							
	Wilmington	NC	28411	An	nount	of I	Each F	Receipt t	his F	Period					
	FEC ID number of contributing federal political committee.	С			250.00						00]			
	Name of Employer	Occupation	I	- Voli	untary	/ me	mber c	contributi	ion						
	Physician Alliance for Mental	Physician		_											
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)		, 250.00												
с.	Full Name (Last, First, Middle Initial) Dr. Sanjay Chandranath Patel	1		Da	ate of	Ree	ceipt								
	Mailing Address 111 West Grover Street				02	/	D 10) 14	Y				
	City	State	Zip Code		Frans	acti	on ID :	SA11A		_					
	Shelby	NC	28150	An	nount	of I	Each F	Receipt t	his F	Period					
	FEC ID number of contributing federal political committee.	ů – Elektrik							tion	250	.00				
	Name of Employer	Occupation	l		untar	y me	sinber (contribut	001						
	Sanger Heart & Vascular Instit	Physician		_											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify) ▼		250.00												
s	UBTOTAL of Receipts This Page (optional)						,			750.	00]			

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

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 9 OF

17

-			Use separate schedule(s)	(check on	ly one)				
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	17	
	ny information copied from such Reports and Si for commercial purposes, other than using the			son for the	purpose of	f soliciting	contribut	tions	_
	NAME OF COMMITTEE (In Full) North Carolina Medical Society	Federal F	Political Education and A	Action C	ommitte	e			
A .	Full Name (Last, First, Middle Initial) Dr. Todd Allen Rogers Mailing Address PO Box 15386 City Durham FEC ID number of contributing federal political committee. Name of Employer Durham Emergency Physicians, PA Receipt For: Primary General Other (specify)	State NC C Occupation Physician Aggregate	Zip Code 27704-0386 Year-to-Date ▼ 250.00	01 Trans	f Receipt	SA11AI. ⁴ Receipt thi	is Period 250		
в.	Full Name (Last, First, Middle Initial) James Santangelo Mailing Address 355 Edinburg Drive City	State	Zip Code	01	f Receipt		2014 15435	Y	
	Fayetteville FEC ID number of contributing federal political committee. Name of Employer Womack Army Hospital Receipt For:	NC C Occupation Physician	28313 Year-to-Date ▼		t of Each F		250.	.00	
	Primary General Other (specify) ▼		250.00						
с.	Full Name (Last, First, Middle Initial) Dr. Gregory F. Schimizzi Mailing Address 1710 South 17th Street City Wilmington FEC ID number of contributing federal political committee. Name of Employer Carolina Arthritis Associates, PA Receipt For: Primary General Other (specify) ▼	State NC C Occupation Physician Aggregate	Zip Code 28401 Year-to-Date ▼ 250.00	01 Trans	f Receipt	SA11AL Receipt th	is Period 250		
S	UBTOTAL of Receipts This Page (optional)						750.	00	

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

SCHEDULE A (FEC Form 3X) DEOEIDTO . . .

FOR LINE NUMBER:

(check only one)

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17

TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) North Carolina Medical Socie	ety Federal F	Political Education and	Action Committee			
Full Name (Last, First, Middle Initial) Wendy Simmons Mailing Address 1710 South 17th Street City Wilmington FEC ID number of contributing federal political committee.	Wendy Simmons failing Address 1710 South 17th Street Sity State Zip Code Wilmington NC 27410 EC ID number of contributing C C					
Name of Employer Carolina Arthritis Assocs Receipt For: Primary General Other (specify) v	Occupation Physician A Aggregate		Voluntary member contribution			
Full Name (Last, First, Middle Initial) Dr. Patrick Joseph Simpson Mailing Address 205 Page Road City	Dr. Patrick Joseph Simpson lailing Address 205 Page Road					
Pinehurst FEC ID number of contributing federal political committee. Name of Employer Pinehurst Medical Clinic, Inc. Receipt For: Primary General Other (specify) ▼	NC C Occupation Physician Aggregate	28374-8749 Year-to-Date ▼ 250.00	Transaction ID : SA11AI.15462 Amount of Each Receipt this Period 250.00 Voluntary member contribution			
Full Name (Last, First, Middle Initial) Dr. Brian Edward Smith Mailing Address 8 Medical Park Drive City Asheville FEC ID number of contributing federal political committee. Name of Employer Asheville Eye Associates, PLLC Receipt For: Primary General Other (specify) ▼	State NC C Occupation Physician Aggregate	Zip Code 28803-2493 Year-to-Date ▼ 250.00	Date of Receipt 01 27 2014 Transaction ID : SA11AI.15453 Amount of Each Receipt this Period 250.00 Voluntary member contribution			
SUBTOTAL of Receipts This Page (optional)		750.00			

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

SCHEDULE A (FEC Form 3X) DECEIDTO

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

17

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13		11b 14	11c	12	17
Any information copied from such Reports and S or for commercial purposes, other than using the				or the		pose o	f soliciting	g contribu	utions
NAME OF COMMITTEE (In Full) North Carolina Medical Society									
Full Name (Last, First, Middle Initial) Dr. David Howey Snow Mailing Address 1710 South 17th Street City Wilmington FEC ID number of contributing federal political committee. Name of Employer Carolina Arthritis Associates, PA Receipt For: Primary General Other (specify)	State NC C Occupation Physician Aggregate Ye	Zip Code 28401 ear-to-Date ▼ 250.00		Amoun	sact	15 ion ID : Each F		iis Perioo 25	d 0.00
Full Name (Last, First, Middle Initial) Dr. Charlie Louis Sykes , Jr. Mailing Address 108 Doctors Drive City Boone FEC ID number of contributing federal political committee. Name of Employer Appalachian Internal Medicine Receipt For: Primary General Other (specify) ▼	State NC C Occupation Physician Aggregate Ye	Zip Code 28607 ear-to-Date ▼ 250.00		Amoun	sacti	17 ion ID : Each F		is Perioo 250	d 0.00
Full Name (Last, First, Middle Initial) Dr. John Joseph Walker Mailing Address Mailing Address 1701 Westchester Avenue Ste 850 City High Point FEC ID number of contributing federal political committee. Name of Employer Cornerstone Healthcare Receipt For: Primary General Other (specify)	State NC C Occupation Physician Aggregate Ye	Zip Code 27262-3832 ear-to-Date ▼ 250.00	/	Amoun	/ sact t of	27 <u>ion ID</u> Each F		iis Perioo 25	
SUBTOTAL of Receipts This Page (optional)						,		750	0.00

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

5000.00

S	HEDULE B (FEC Form 3X)			F	OR		UMBE	B∙		PA	GE 12	OF 17				
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		-	k only	lly one)									
			Summary Page		$\left - \right $	21b 27	22	a –	23 28b	24 28c	25 X 29	26 30b				
	y information copied from such Reports and State for commercial purposes, other than using the nar					perso	n for th	ie pu	rpose	of solicitir	ng contribu	utions				
	NAME OF COMMITTEE (In Full)						_	_								
	North Carolina Medical Society Fe	deral Po	olitical Educa	ation	an	nd Ac	tion	Cor	nmit	tee						
Α.	Full Name (Last, First, Middle Initial) Hugh Blackwell									ement						
	Mailing Address 321 Mountain View Ave., SE						03 11 2014									
	Valdese	State NC	Zip Code 27613) : SB29.1	5495											
	Purpose of Disbursement 2014 NC House Primary Contribution						Amo	unt of	f Each	Disburse	ment this	Period				
	Candidate Name				egor ype	γ/			,	,	100	0.00				
	Office Sought: House Disburse Senate President	General cify) ▼														
	State: District: Full Name (Last, First, Middle Initial)															
В.	Bill Brawley								isburs	ement	YYYY					
	Mailing Address 13612 O'Toole Drive						M 0:	Y								
	Matthews	State NC	Zip Code 28105				Tra	nsac	tion II	D : SB29.15498						
	Purpose of Disbursement 2014 NC House Primary Contribution						Amo	unt of	f Fach	Disburse	ment this	Period				
	Candidate Name				egor ype	ry/		100								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼													
	State: District:															
C.	Full Name (Last, First, Middle Initial) Dana Bumgardner						Date		isburs	ement	Y Y Y	V				
	Mailing Address 3517 Lincoln Lane						0;			1	2014					
	Gastonia	State NC	Zip Code 28056				Tra	nsac	tion IC	D : SB29.1	5499					
	Purpose of Disbursement 2014 NC House Primary Contribution						Amo	unt of	f Each	Disburse	ment this	Period				
	Candidate Name				egor ype	·y/			,	,	200	0.00				
	Senate President	ment For: Primary Other (spe	General cify) ▼													
	State: District:															
⊢	UBTOTAL of Disbursements This Page (optional).						E		7		400	0.00				
1'	OTAL This Period (last page this line number only	,	•••••						7			n				

	CHEDULE B (FEC Form 3X)		rate schedule(s)				NUMBER: PAGE 13 OF 17										
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(c	nec	k only 21b 27		22 28a		23 28b	F	24 28c		25 29	26 30b		
	y information copied from such Reports and State for commercial purposes, other than using the na												g con				
\setminus	NAME OF COMMITTEE (In Full)																
	North Carolina Medical Society Fe	ederal Po	litical Educa	ition	ar	nd Ac	ctio	n C	Con	nmit	tte	e					
Α.	Full Name (Last, First, Middle Initial) Debra Conrad		Da	ate c	of Di	isburs	en	nent									
	Mailing Address 4004 Pemberton Ct						03 11 2014										
	City Winston-Salem	State NC	Zip Code 27106				Transaction ID : SB29.15492										
	Purpose of Disbursement 2014 NC House Primary Contribution		21100				Ar	nour	nt of	Fach	ιΓ	Disburser	nenti	this F	Period		
	Candidate Name			Cate	egoi ype	ry/											
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General		,00												
	State: District:]															
В.							_			_		_					
	Mailing Address 4456 Orchard Knob Lane							03			11	D : SB29.15489					
	City High Point	State NC	Zip Code 27265					Fran	sact	tion II	ID : SB29.15489						
	Purpose of Disbursement 2014 NC House Primary Contribution						Ar	Amount of Each Disbursement this						this F	Period		
	Candidate Name			Cate T	egoi ype	ry/							1000	.00			
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General Sify) ▼														
	State: District:	ŗ															
C.	Full Name (Last, First, Middle Initial) Michael Hager						_		_			_					
	Mailing Address 342 Walking Horse Trail							03			ursement 11 / Y Y Y Y 11 2014		Y				
	City Rutherfordton	State NC	Zip Code 28139				-	Fran	sact	tion II	D :	SB29.1	5501				
	Purpose of Disbursement 2014 NC House Primary Contribution						۸.			Took		Nichuroor	nont	thia [Deried		
	Candidate Name			Cate	egoi ype		A	nour		Eacr	1 L	Disburser		1000			
	Senate President	ement For: Primary Other (spec	General cify) ▼							7							
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Α.	Full Name (Last, First, Middle Initial) Julia Howard						Date o	of Di	sburs	eme	ent						
	Mailing Address 330 S. Salisbury street											2014	Y				
	City Mocksville	State NC	Zip Code 27028					Tran	sact	ion IE): S	SB29.15	5494				
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в.	Full Name (Last, First, Middle Initial) Bert Jones							Date o	of Di	sburs	eme	ent					
	Mailing Address 299 Fairfield Road						1						2014	Y			
	City Reidsville	State NC	Zip Code 27320					Transaction ID : SB29.15491 Amount of Each Disbursement this Per									
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C.	Full Name (Last, First, Middle Initial) Donny Lambeth							Date o	_			ent		_			
	Mailing Address 4627 S. Main Street							03		D	11	/ Y	2014	- Y			
	Winston-Salem	State NC	Zip Code 27127					Tran	sact	ion IE	D : 8	SB29.1	5493				
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Α.	Full Name (Last, First, Middle Initial) David Lewis		Date o													
	Mailing Address PO Box 1152											2014				
	City Dunn	State Zip Co NC 28335					Transaction ID : SB29.15490									
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В.	Full Name (Last, First, Middle Initial) Chuck McGrady						Date o		sburse		YY	V				
	Mailing Address PO BOX 723					03 11 2										
	City Hendersonville	State Zip Co NC 28793					Tran	sacti	ion ID	: SB29.1	5504					
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C.	Full Name (Last, First, Middle Initial) Tim Moffitt						Date o	_				V				
	Mailing Address 3182 Sweeten Creek Road						M M / D D / Y									
	City Asheville	State Zip Co NC 28803					Tran	sacti	ion ID	: SB29.1	5503					
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Α.	Full Name (Last, First, Middle Initial) Tim Moore			Date													
	Mailing Address 305 East King St.					03 / D D / Y Y Y Y 2014							Y				
	City Kings Mountain	Zip Code 28086	Transaction ID : SB29.15505														
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В.	Thomas Murry							Date	_		ser		Y Y	V			
	Mailing Address PO Box 1054							03 11 2014									
	City Morrisville	State NC	Zip Code 27560					Trai	nsac	tion I	ID : SB29.15488						
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C.	Full Name (Last, First, Middle Initial) Nathan Ramsey							Date			ser		Y Y	V			
	Mailing Address 26 Ramsey Farm Road							03			11		2014				
	City Fairview	State NC	Zip Code 28730					Trai	nsac	tion I	D	: SB29.1	5502				
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Α.	Full Name (Last, First, Middle Initial) Mitchell Setzer			Date	of Di	sburse	eme	ent									
	Mailing Address PO Box 416							03	2014	Y							
	Catawba	State NC	Zip Code 28609				Transaction ID : SB29.15497										
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В.	Full Name (Last, First, Middle Initial) Rena Turner							Date	-				- Y - Y	V			
	Mailing Address 247 Gethsemane Road							03 / D D / Y Y Y 2014									
	City Olin Purpose of Disbursement	State NC	Zip Code 28660					Trar	sact	tion IE	D : 8	: SB29.15496					
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