

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

NC RED

ADDRESS (number and street) PO BOX 97275 RALEIGH NC 27624

2. FEC IDENTIFICATION NUMBER C00768085 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2023 through 12 / 31 / 2023

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 McMichael, Collin, , ,

Signature of Treasurer McMichael, Collin, , , Date 01 / 28 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**NC RED**

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="2023"/>		40620.13
(b) Cash on Hand at Beginning of Reporting Period.....	61523.84	
(c) Total Receipts (from Line 19) .....	64500.00	96000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	126023.84	136620.13
7. Total Disbursements (from Line 31).....	23095.03	33691.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	102928.81	102928.81
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

NC RED

Report Covering the Period: From: 07 / 01 / 2023 To: 12 / 31 / 2023

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).....	54500.00	69500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	54500.00	69500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	26500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	64500.00	96000.00
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 (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)).....▶	64500.00	96000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	64500.00	96000.00

**DETAILED SUMMARY PAGE**

of Disbursements

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 .....	3795.03	6591.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3795.03	6591.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	5000.00	5000.00
(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)).....	5000.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	14300.00	17100.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	23095.03	33691.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23095.03	33691.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	64500.00	96000.00
34. Total Contribution Refunds (from Line 28(d)) .....	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59500.00	91000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3795.03	6591.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3795.03	6591.32

# 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 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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)  
**NC RED**

**A. Baig, Zakir, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 Oakcrest Dr  
 City Alexandria State VA Zip Code 22302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cassidy & Assoc Occupation (for Individual) Senior VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2023  
**Transaction ID : SA11AI.4640**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Brandt, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 511 Deep Creek View  
 City Annapolis State MD Zip Code 21409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tarplin Downs & Young LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2023  
**Transaction ID : SA11AI.4614**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Cantrill, Christopher, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8919 Soaring Oak  
 City San Antonio State TX Zip Code 78255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UROLOGY SAN ANTONIO Occupation (for Individual) UROLOGIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2023  
**Transaction ID : SA11AI.4619**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Cockerill, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8916 Tuscan Hills Drive  
 City Garden Ridge State TX Zip Code 78266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Urology San Antonio Occupation (for Individual) Urologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 10 / 2023  
**Transaction ID : SA11AI.4626**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. Cunningham, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5514 Sherier Place NW  
 City Washington State DC Zip Code 20016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Polaris Consulting Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 28 / 2023  
**Transaction ID : SA11AI.4616**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Goodwin, Charles, Jeffrey, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 Lightfoot Rd  
 City Louisville State KY Zip Code 40207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) First Urology Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 20 / 2023  
**Transaction ID : SA11AI.4628**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 8 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Greenblatt, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Brookhaven Rd  
 City Pinehurst State NC Zip Code 28374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Veterans Guardian VA Claim Con Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 12 / 05 / 2023  
**Transaction ID : SA11AI.4685**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 RARD Requested 12/5/2023

**B. Harmon, William, James, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15045 Chinquapin  
 City Helotes State TX Zip Code 78023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 11 / 2023  
**Transaction ID : SA11AI.4621**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Imperatore, Brant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6144 Tompkins Dr  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 29 / 2023  
**Transaction ID : SA11AI.4682**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 9 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Johnson, Travis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5640 19th St N  
 City Arlington State VA Zip Code 22205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1607 Strategies Occupation (for Individual) Founder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2023  
**Transaction ID : SA11AI.4606**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Keiser, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 Tennessee Ave NE  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Navigators Global Occupation (for Individual) Senior Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2023  
**Transaction ID : SA11AI.4673**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Lamond, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5005 Worthington Drive  
 City Washington State DC Zip Code 20816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thorn Run Partners Occupation (for Individual) Lobbyist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2023  
**Transaction ID : SA11AI.4610**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# 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 10 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NC RED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Leavitt, Ryan, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2023 <b>Transaction ID : SA11AI.4638</b>
Mailing Address 3255 Pony Ridge Way		Amount of Each Receipt this Period 500.00
City Oakton	State VA	Zip Code 22124
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Barker Leavitt, PLLC	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Locke, Tim, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2023 <b>Transaction ID : SA11AI.4675</b>
Mailing Address 2111 Woodmont Road		Amount of Each Receipt this Period 1000.00
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Smith Free Group	Occupation (for Individual) Government Relations Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McCarthy, Justin, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2023 <b>Transaction ID : SA11AI.4677</b>
Mailing Address 3921 Military Road Northwest		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Akin	Occupation (for Individual) Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 11 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Medley, Jennifer, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3110 Arden Road  
 City Louisville State KY Zip Code 40222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Comcast Occupation (for Individual) Political Affaris Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : SA11AI.4630**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Oxner, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 North Quebec Street  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cogent Strategies Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2023  
**Transaction ID : SA11AI.4686**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Remington, Kristi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 Rhode Island Ave  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) West Front Strategies LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2023  
**Transaction ID : SA11AI.4609**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 12 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Shannon, Michael, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Hospital Blvd  
 City Jeffersonville State IN Zip Code 47130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) First Urology Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : SA11AI.4636**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Shannon, Teresa, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 Rugby Pl  
 City Louisville State KY Zip Code 40222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Red Cross Occupation (for Individual) LMS Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : SA11AI.4634**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Soergel, Whitney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2544 Woodbourne Ave  
 City Louisville State KY Zip Code 40205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : SA11AI.4632**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# 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 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Taylor, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Whitehaven Drive  
 City Pinehurst State NC Zip Code 28374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vets Guardian VA Claim Consult Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2023  
**Transaction ID : SA11AI.4671**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Thorsen, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7100 Maple Avenue  
 City Takoma Park State MD Zip Code 20912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thorsen French Advocacy Occupation (for Individual) CoFounder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023  
**Transaction ID : SA11AI.4683**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Verdery, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3628 Davis St NW  
 City Washington State DC Zip Code 20007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Monument Advocacy Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2023  
**Transaction ID : SA11AI.4612**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 14 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NC RED**

**A. Verhoff, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3722 Munson Road  
 City Falls Church State VA Zip Code 22041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Akin Gump Occupation (for Individual) Senior Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2023  
**Transaction ID : SA11AI.4679**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Weld, Kyle, Jones, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 419 Cavayo Trail  
 City Helotes State TX Zip Code 78023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2023  
**Transaction ID : SA11AI.4624**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C. White, Michael, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 Manchester Way  
 City Shavano Park State TX Zip Code 78249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Urology San Antonio Occupation (for Individual) Urologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2023  
**Transaction ID : SA11AI.4617**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	54500.00

# 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 15 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NC RED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1333 NEW HAMPSHIRE AVENUE, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 04 / 2023

**Transaction ID : SA11C.4642**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MAYNARD NEXSEN PAC**

Mailing Address 1901 SIXTH AVENUE NORTH  
2400 REGIONS/HARBERT PLAZA

City BIRMINGHAM State AL Zip Code 35203

FEC ID number of contributing federal political committee. **C** C00272724

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 22 / 2023

**Transaction ID : SA11C.4680**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

**A. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 18 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4649

Amount of Each Disbursement this Period: 200.30

Memo Item

**B. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 13 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4650

Amount of Each Disbursement this Period: 40.30

Memo Item

**C. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 26 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4651

Amount of Each Disbursement this Period: 60.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 300.90

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

**A. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 27 / 2023

FEC Identification Number  
**C**

**Transaction ID : SB21B.4652**

Amount of Each Disbursement this Period  
40.30

Memo Item

**B. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 03 / 2023

FEC Identification Number  
**C**

**Transaction ID : SB21B.4654**

Amount of Each Disbursement this Period  
160.60

Memo Item

**C. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 13 / 2023

FEC Identification Number  
**C**

**Transaction ID : SB21B.4655**

Amount of Each Disbursement this Period  
80.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 281.20

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

**A. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 06 / 2023

FEC Identification Number  
**C**  
Transaction ID : **SB21B.4656**  
Amount of Each Disbursement this Period  
20.30

Memo Item

**B. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2023

FEC Identification Number  
**C**  
Transaction ID : **SB21B.4657**  
Amount of Each Disbursement this Period  
40.30

Memo Item

**C. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 05 / 2023

FEC Identification Number  
**C**  
Transaction ID : **SB21B.4688**  
Amount of Each Disbursement this Period  
200.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 260.90

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

Full Name (Last, First, Middle Initial) <b>A. Anedot Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2023
Mailing Address 1340 Poydras Street Suite 1770		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.4689</b> Amount of Each Disbursement this Period 240.60
City New Orleans	State LA	
Purpose of Disbursement PAC Merchant Fees		Memo Item <input type="checkbox"/>
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>B. Anedot Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 14 / 2023
Mailing Address 1340 Poydras Street Suite 1770		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.4690</b> Amount of Each Disbursement this Period 80.60
City New Orleans	State LA	
Purpose of Disbursement PAC Merchant Fees		Memo Item <input type="checkbox"/>
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>C. Anedot Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2023
Mailing Address 1340 Poydras Street Suite 1770		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.4693</b> Amount of Each Disbursement this Period 80.60
City New Orleans	State LA	
Purpose of Disbursement PAC Merchant Fees		Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	401.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

**A. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2023

FEC Identification Number: **C**

Transaction ID : **SB21B.4694**

Amount of Each Disbursement this Period: 80.30

Memo Item

**B. Anedot Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement  
PAC Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2023

FEC Identification Number: **C**

Transaction ID : **SB21B.4695**

Amount of Each Disbursement this Period: 40.30

Memo Item

**C. CM&Co., LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement  
PAC Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 01 / 2023

FEC Identification Number: **C**

Transaction ID : **SB21B.4644**

Amount of Each Disbursement this Period: 343.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 464.55

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**NC RED**

**A. CM&Co., LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement  
PAC Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 11 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4646  
Amount of Each Disbursement this Period: 392.93

Memo Item

**B. CM&Co., LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement  
PAC Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 06 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4647  
Amount of Each Disbursement this Period: 442.75

Memo Item

**C. H2 Capital Consulting, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 402 Princeton Blvd

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 28 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.4659  
Amount of Each Disbursement this Period: 1250.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2085.68
<b>TOTAL</b> This Period (last page this line number only).....▶	3795.03

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**NC RED**

**A. Greenblatt, Scott, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Brookhaven Rd

City Pinehurst State NC Zip Code 28374

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2023

FEC Identification Number: C

Transaction ID : SB28A.4696

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NC RED**

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Catherine Truitt</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2023
Mailing Address P O Box 99024		FEC Identification Number <b>C</b> <b>Transaction ID : SB29.4667</b> Amount of Each Disbursement this Period 6400.00
City Raleigh	State NC	
Zip Code 27624	Purpose of Disbursement Non Federal Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Historical Al-Pam Republican Club</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2023
Mailing Address 378 Jordan Thick Road		FEC Identification Number <b>C</b> <b>Transaction ID : SB29.4669</b> Amount of Each Disbursement this Period 1500.00
City Plymouth	State NC	
Zip Code 27962	Purpose of Disbursement Non Federal Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. The Jefferson Griffin Committee</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2023
Mailing Address P O Box 99780		FEC Identification Number <b>C</b> <b>Transaction ID : SB29.4665</b> Amount of Each Disbursement this Period 6400.00
City Raleigh	State NC	
Zip Code 27624	Purpose of Disbursement Non Federal Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14300.00