

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GROW NC STRONG INC

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="94081.71"/>	<input type="text" value="94081.71"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="121833.39"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="105000.00"/>	<input type="text" value="170000.00"/>
(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="226833.39"/>	<input type="text" value="264081.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="214448.79"/>	<input type="text" value="251697.11"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12384.60"/>	<input type="text" value="12384.60"/>
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

Write or Type Committee Name

GROW NC STRONG INC

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

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	105000.00	170000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	105000.00	170000.00
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))..... ▶	105000.00	170000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	105000.00	170000.00

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	15039.27	52287.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15039.27	52287.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	199409.52	199409.52
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)) ..	214448.79	251697.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	214448.79	251697.11

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)	105000.00	170000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105000.00	170000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15039.27	52287.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15039.27	52287.59

**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 11
<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

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)
GROW NC STRONG INC

Full Name (Last, First, Middle Initial) A. AMERICAN CROSSROADS		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2014
Mailing Address P.O. BOX 34413		Transaction ID : SA11C.4199
City WASHINGTON	State DC	Zip Code 20043
FEC ID number of contributing federal political committee. C C00487363		Amount of Each Receipt this Period 105000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 170000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	105000.00
TOTAL This Period (last page this line number only).....▶	105000.00

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"/> 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

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)
GROW NC STRONG INC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City Mclean State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Transaction ID : SB21B.4222

Amount of Each Disbursement this Period

20.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City Mclean State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Transaction ID : SB21B.4223

Amount of Each Disbursement this Period

20.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City Mclean State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2014

Transaction ID : SB21B.4224

Amount of Each Disbursement this Period

40.00

Category/
Type

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

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

80.00

**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"/> 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

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)
GROW NC STRONG INC

Full Name (Last, First, Middle Initial)

A. Clark Hill PLC

Mailing Address 601 Pennsylvania Avenue NW
Suite 1000N

City Washington State DC Zip Code 20004

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Transaction ID : SB21B.4220

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. Clark Hill PLC

Mailing Address 601 Pennsylvania Avenue NW
Suite 1000N

City Washington State DC Zip Code 20004

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2014

Transaction ID : SB21B.4221

Amount of Each Disbursement this Period

4083.52

Full Name (Last, First, Middle Initial)

C. Oak Grove Campaigns

Mailing Address 2474 Walnut Street
#322

City Cary State NC Zip Code 27518

Purpose of Disbursement
Strategy Consultanting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Transaction ID : SB21B.4217

Amount of Each Disbursement this Period

5000.00

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

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

9783.52

**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"/> 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

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)
GROW NC STRONG INC

Full Name (Last, First, Middle Initial)

A. Oak Grove Campaigns

Mailing Address 2474 Walnut Street
#322

City Cary State NC Zip Code 27518

Purpose of Disbursement
Strategy Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2014

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Professional Recruiters, Inc.

Mailing Address 6009 Overlea Road

City Bethesda State MD Zip Code 20816

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2014

Transaction ID : SB21B.4218

Amount of Each Disbursement this Period

175.75

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

5175.75

15039.27

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROW NC STRONG INC
FEC IDENTIFICATION NUMBER
C C00545152
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Chatham Light Media, LLC
Mailing Address
P.O. BOX 1330
City
STOWE State
VT Zip Code
05672
Date of Public Distribution/Dissemination
04 / 22 / 2014
Amount
3100.00
Transaction ID : SE.4211
Date of Disbursement or Obligation
04 / 22 / 2014
Purpose of Expenditure
Media Production
Category/Type
Name of Federal Candidate
THOM R TILLIS
Support
Office Sought:
Senate State: NC
Calendar Year-To-Date
Per Election for Office Sought
3100.00
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Chatham Light Media, LLC
Mailing Address
P.O. BOX 1330
City
STOWE State
VT Zip Code
05672
Date of Public Distribution/Dissemination
05 / 01 / 2014
Amount
3625.00
Transaction ID : SE.4200
Date of Disbursement or Obligation
05 / 01 / 2014
Purpose of Expenditure
Media Production
Category/Type
Name of Federal Candidate
THOM R TILLIS
Support
Office Sought:
Senate State: NC
Calendar Year-To-Date
Per Election for Office Sought
105109.80
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 6725.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Doyle Parrish
[Electronically Filed]
Date
07 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROW NC STRONG INC
FEC IDENTIFICATION NUMBER
C C00545152
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
MAIN STREET MEDIA GROUP
Mailing Address
P.O. BOX 25093
City
ALEXANDRIA State
VA Zip Code
22313
Date of Public Distribution/Dissemination
04 / 22 / 2014
Amount
98384.80
Transaction ID : SE.4212
Date of Disbursement or Obligation
04 / 22 / 2014
Purpose of Expenditure
Media Buy Category/
Type
Name of Federal Candidate
THOM R TILLIS Support
Office Sought:
House District:
President Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
101484.80
Disbursement For:
Primary General
2014 Other (specify)

Full Name of Payee
MAIN STREET MEDIA GROUP
Mailing Address
P.O. BOX 25093
City
ALEXANDRIA State
VA Zip Code
22313
Date of Public Distribution/Dissemination
05 / 01 / 2014
Amount
94299.72
Transaction ID : SE.4201
Date of Disbursement or Obligation
05 / 01 / 2014
Purpose of Expenditure
Media Buy Category/
Type
Name of Federal Candidate
THOM R TILLIS Support
Office Sought:
House District:
President Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
199409.52
Disbursement For:
Primary General
2014 Other (specify)

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures 192684.52. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (c) TOTAL Independent Expenditures 199409.52.

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Doyle Parrish [Electronically Filed] Date 07 / 15 / 2014
Signature