

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.

Carolinas Credit Union League Credit Union Defense Fund

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 Ms. Mary Gardner

Signature of Treasurer Ms. Mary Gardner [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Carolinas Credit Union League Credit Union Defense Fund

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="47613.25"/>	<input type="text" value="47613.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26842.10"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4864.50"/>	<input type="text" value="23268.87"/>
(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="31706.60"/>	<input type="text" value="70882.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="152.14"/>	<input type="text" value="40661.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31554.46"/>	<input type="text" value="30220.60"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Carolinas Credit Union League Credit Union Defense Fund

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).....	2233.54	6576.88
(ii) Unitemized	2628.72	16649.38
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4862.26	23226.26
(b) Political Party Committees	0.00	0.00
(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)	4862.26	23226.26
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	12.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.24	30.61
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))..... ▶	4864.50	23268.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4864.50	23268.87

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	100.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	100.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	40000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	52.14	561.52
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)) ..	152.14	40661.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	152.14	40661.52

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)	4862.26	23226.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4862.26	23226.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	100.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	12.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100.00	88.00

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial)
A. Scott Weaver

Mailing Address 9 Colonel Storrs Ct

City Greer State SC Zip Code 29650-5014

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

Name of Employer Carolina Foothills Federal Credit Unio Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2014

Transaction ID : 12948812

Amount of Each Receipt this Period
70.00

Full Name (Last, First, Middle Initial)
B. Bill Love

Mailing Address 127 Birkhall Circle

City Greenville State SC Zip Code 29605-5952

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

Name of Employer MTC Federal Credit Union Occupation President - CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2014

Transaction ID : 12948817

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Bill Love

Mailing Address 127 Birkhall Circle

City Greenville State SC Zip Code 29605-5952

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

Name of Employer MTC Federal Credit Union Occupation President - CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2014

Transaction ID : 12948943

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

TOTAL 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: PAGE 7 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial)
A. Scott Weaver

Mailing Address 9 Colonel Storrs Ct

City Greer State SC Zip Code 29650-5014

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

Name of Employer Carolina Foothills Federal Credit Unio Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 18 / 2014

Transaction ID : 12948944

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. ACH Account

Mailing Address P.O. Box 1787

City Columbia State SC Zip Code 29202-1787

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 551.64

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

Transaction ID : 12949362

Amount of Each Receipt this Period
133.66

Full Name (Last, First, Middle Initial)
C. ACH Account

Mailing Address P.O. Box 1787

City Columbia State SC Zip Code 29202-1787

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 685.30

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2014

Transaction ID : 12949363

Amount of Each Receipt this Period
133.66

SUBTOTAL of Receipts This Page (optional)..... ▶ 342.32

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

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NAME OF COMMITTEE (In Full)
Carolinas Credit Union League Credit Union Defense Fund

A. Angie M Burr
Full Name (Last, First, Middle Initial)

Mailing Address 525 Lansdowne Drive

City Florence State SC Zip Code 29501-1947

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

Name of Employer Palmetto First Federal Credit Union Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 24 / 2014**
Transaction ID : PR10417079629

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$25.00 Monthly)

B. Faith Ann Borst
Full Name (Last, First, Middle Initial)

Mailing Address 81 Lake Marion Dr

City North Augusta State SC Zip Code 29841-8667

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

Name of Employer SRP Federal Credit Union Occupation VP of Lending

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **807.80**

Date of Receipt **11 / 24 / 2014**
Transaction ID : PR14187469629

Amount of Each Receipt this Period **207.72**

P/R Deduction (\$23.08 Monthly)

C. Anne G Shivers
Full Name (Last, First, Middle Initial)

Mailing Address 323 Governor's Grant Blvd

City Lexington State SC Zip Code 29072-7525

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

Name of Employer Carolina Collegiate Federal Credit Uni Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 24 / 2014**
Transaction ID : PR32835509629

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **307.72**

TOTAL 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 14
<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)
Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial) A. Ed Presnell		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR3401719629
Mailing Address P.O. Box 6730		Amount of Each Receipt this Period 230.80
City North Augusta	State SC	Zip Code 29861-6730
FEC ID number of contributing federal political committee. C	Name of Employer SRP Federal Credit Union	
Occupation VP Admin Services		P/R Deduction (\$23.08 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.88	

Full Name (Last, First, Middle Initial) B. David D'Annunzio		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR5342289629
Mailing Address 3501 Flowering Way		Amount of Each Receipt this Period 75.00
City Mt. Pleasant	State SC	Zip Code 29466
FEC ID number of contributing federal political committee. C	Name of Employer Heritage Trust Federal Credit Union	
Occupation CFO/SVP		P/R Deduction (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Michael Beam		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR564989629
Mailing Address 3521 Boundbrook Lane		Amount of Each Receipt this Period 150.00
City Columbia	State SC	Zip Code 29206-3401
FEC ID number of contributing federal political committee. C	Name of Employer Palmetto Citizens Federal Credit Union	
Occupation CFO		P/R Deduction (\$150.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	455.80
TOTAL 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 14
	<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)
Carolinas Credit Union League Credit Union Defense Fund

A. Clint Clayborn
Full Name (Last, First, Middle Initial)

Mailing Address 211 Sweet Thorne Rd.

City State Zip Code
Irmo SC 29063-8314

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

Name of Employer Occupation
Palmetto Citizens Federal Credit Union Training/HR Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR564999629

Amount of Each Receipt this Period
75.00

P/R Deduction (\$75.00 Semi-Monthly)

B. Stephen Wichmann
Full Name (Last, First, Middle Initial)

Mailing Address 311 Alwyn Blvd

City State Zip Code
Summerville SC 29485-4080

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

Name of Employer Occupation
Heritage Trust Federal Credit Union SVP Lending

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR565059629

Amount of Each Receipt this Period
75.00

P/R Deduction (\$50.00 Monthly)

C. Linda Jordan
Full Name (Last, First, Middle Initial)

Mailing Address 3531 Bethune Hwy

City State Zip Code
Bishopville SC 29010-8267

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

Name of Employer Occupation
SPC Credit Union VP - Member Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR566069629

Amount of Each Receipt this Period
75.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL 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: PAGE 11 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Carolinas Credit Union League Credit Union Defense Fund

A. Paul Hughes
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 River Walk Drive
 City Simpsonville State SC Zip Code 29681-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Greenville FCU Occupation President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR566139629
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Monthly)

B. Bill Varn
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 Hawthorne Drive
 City Hartsville State SC Zip Code 29550-8066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPC Credit Union Occupation President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR567709629
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$150.00 Bi-Weekly)

C. Ed Templeton
 Full Name (Last, First, Middle Initial)
 Mailing Address 260 Sugarcreek Dr.
 City Grovetown State GA Zip Code 30813-4315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SRP Federal Credit Union Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR568029629
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL 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 14
	<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)
Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial) A. Jim McDaniel		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR570369629
Mailing Address 1115 Bruton Blvd		Amount of Each Receipt this Period 150.00
City Moncks Corner	State SC	Zip Code 29461-8213
FEC ID number of contributing federal political committee.	C	
Name of Employer Heritage Trust Federal Credit Union	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
		P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. Billy Byrd		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR572259629
Mailing Address 2119 Bobwhite Lane		Amount of Each Receipt this Period 75.00
City Hartsville	State SC	Zip Code 29550-2871
FEC ID number of contributing federal political committee.	C	
Name of Employer SPC Credit Union	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Tina Glenn		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR572559629
Mailing Address 256 Bridgeport Dr		Amount of Each Receipt this Period 57.70
City Myrtle Beach	State SC	Zip Code 29577-6744
FEC ID number of contributing federal political committee.	C	
Name of Employer Carolina Trust Federal Credit Union	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96	
		P/R Deduction (\$34.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	282.70
TOTAL 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 14
	<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)
Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial) A. Travis Walters		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR574249629
Mailing Address 354 Brookwood Dr		Amount of Each Receipt this Period 75.00
City Hartsville State SC Zip Code 29550-8052	FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Bi-Weekly)
Name of Employer SPC Credit Union Occupation Board Member	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) B. Lisa Shoemaker		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR574559629
Mailing Address 134 Fox Crossing Rd		Amount of Each Receipt this Period 75.00
City West Columbia State SC Zip Code 29170-2418	FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Semi-Monthly)
Name of Employer Palmetto Citizens Federal Credit Union Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
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).....▶	150.00
TOTAL This Period (last page this line number only).....▶	2233.54

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"/> 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 checked="" 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)

Carolinas Credit Union League Credit Union Defense Fund

Full Name (Last, First, Middle Initial)

A. First Carolina Corporate CU

Mailing Address P.O. Box 49379

City Greensboro State NC Zip Code 27419

Purpose of Disbursement

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	7		2	0	1	4		

Transaction ID : 12949374

Amount of Each Disbursement this Period

52.14

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

52.14

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

52.14