

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
North Carolina Democratic Party - Federal

ADDRESS (number and street) 220 Hillsborough Street
 Check if different than previously reported. (ACC)
Raleigh NC 27603

2. **FEC IDENTIFICATION NUMBER** C00165688
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on 11 07 2006 in the State of NC
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Muriel K. Offerman

Signature of Treasurer Electronically Filed by Muriel K. Offerman Date 10 25 2006

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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
North Carolina Democratic Party - Federal

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 249045.32 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 802415.35 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 874286.77 | 2250071.02 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 1676702.12 | 2499116.34 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 1244417.72 | 2066831.94 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 432284.40 | 432284.40 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
North Carolina Democratic Party - Federal

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 55670.00 | 569115.14 |
| (i) Itemized (use Schedule A) | 14682.00 | 48544.00 |
| (ii) Unitemized | 70352.00 | 617659.14 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 22120.00 |
| (b) Political Party Committees | 62403.38 | 160624.82 |
| (c) Other Political Committees (such as PACs) | 132755.38 | 800403.96 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 12. Transfers From Affiliated/Other Party Committees | 700031.39 | 1024924.01 |
| 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 | 218243.05 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 41500.00 | 206500.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 41500.00 | 206500.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 874286.77 | 2250071.02 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 832786.77 | 2043571.02 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 1484.32 | 74544.56 |
| (ii) Non-Federal Share..... | 8411.18 | 422417.89 |
| (b) Other Federal Operating Expenditures..... | 279016.38 | 339375.80 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 288911.88 | 836338.25 |
| 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 Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 545863.53 | 706488.53 |
| 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 | 2601.04 |
| (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 | 2601.04 |
| 29. Other Disbursements..... | 0.00 | 5082.40 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared 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 | 409642.31 | 516321.72 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 409642.31 | 516321.72 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 1244417.72 | 2066831.94 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 1236006.54 | 1644414.05 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 132755.38 | 800403.96 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 2601.04 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 132755.38 | 797802.92 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 280500.70 | 413920.36 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 280500.70 | 413920.36 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 97 |
| | <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 | |

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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Breon Allen

Mailing Address P.O. Box 736

City State Zip Code
Biscoe NC 27209

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

Name of Employer Lumber Mill Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2006

Transaction ID: 61007.C61603

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Janet E. Allen

Mailing Address 620 Sugarberry Rd.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2006

Transaction ID: 61007.C61522

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Zebulon Alley

Mailing Address PO Box 12803

City State Zip Code
Raleigh NC 27605

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

Name of Employer Zebulon D. Alley PA Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2006

Transaction ID: 61017.C62065

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Katherine Alonso | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6 | |
| Mailing Address 1401 Timber Trail | | Transaction ID: 61017.C62062 | |
| City Asheville | State NC | Zip Code 28804 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Martin McGill | Occupation Easement Aquisition | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Caroline Anderson | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 2004 N. Brandywine St. | | Transaction ID: 61017.C62050 | |
| City Arlington | State VA | Zip Code 22207 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Donald Anderson | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address Post Office Box 516 | | Transaction ID: 61016.C61954 | |
| City Mars Hill | State NC | Zip Code 28754 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 650.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Phil Baddour | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 208 S. William St. | | Transaction ID: 61007.C61626 | |
| City Goldsboro | State NC | Zip Code 27530 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Self | Occupation Attorney | Aggregate Year-to-Date ▼ 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|---------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Telly Banks | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 5 Bradford Lane, Apt. #5 | | Transaction ID: 61017.C61984 | |
| City Sylva | State NC | Zip Code 28779 | Amount of Each Receipt this Period 600.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Tribal Gaming Commission | Occupation Tribal Gaming Inspector | Aggregate Year-to-Date ▼ 600.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|---------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Telly Banks | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 | |
| Mailing Address 5 Bradford Lane, Apt. #5 | | Transaction ID: 61017.C62066 | |
| City Sylva | State NC | Zip Code 28779 | Amount of Each Receipt this Period 650.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Tribal Gaming Commission | Occupation Tribal Gaming Inspector | Aggregate Year-to-Date ▼ 1250.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Judith Baran

Mailing Address 306 N. Estes Dr. Ext. Apt G 6

City Carrboro State NC Zip Code 27510

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

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 6

Transaction ID: 61003.C61455

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Barrett

Mailing Address 270 Cumberland Ave

City Asheville State NC Zip Code 28801-732

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62009

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Seth Bernanke

Mailing Address 7730 Compton Court

City Charlotte State NC Zip Code 28270-9548

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61820

Amount of Each Receipt this Period
250.00

Receipt

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 700.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 10 / 97 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Seth Bernanke

Mailing Address 7730 Compton Court

City State Zip Code
Charlotte NC 28270-9548

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: 61020.C62085

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marvin Blount

Mailing Address 311 Middleton Place

City State Zip Code
Greenville NC 27858

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

Name of Employer Blount Law Firm Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: 61003.C61495

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Arthur Bluethenthal

Mailing Address P.O. Box 9403

City State Zip Code
Greensboro NC 27429-403

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: 61020.C62091

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Bernadette Buckner

Mailing Address 1 College Crescent

City State Zip Code
Weaverville NC 28787

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 6

Transaction ID: 61003.C61456

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Patrick Buffkin

Mailing Address 2501 H Avent Ferry Rd.

City State Zip Code
Raleigh NC 27606

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

Name of Employer Occupation
Zebulon D. Alley PA Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61017.C62063

Amount of Each Receipt this Period
225.00

Receipt

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

Mailing Address 5411 Rambling Road

City State Zip Code
Greensboro NC 27409

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61570

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 675.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Chris Church

Mailing Address 117 Springview Drive

City State Zip Code
Millers Creek NC 28651

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

Name of Employer Occupation
Toyota of Boone Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61918

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stewart Coates

Mailing Address 235 Petesburg View Drive

City State Zip Code
Marshall NC 28753

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61955

Amount of Each Receipt this Period
400.00

Receipt

C. Full Name (Last, First, Middle Initial)
M.J. Cobb

Mailing Address 561 Fred Smith Rd.

City State Zip Code
Tuckasegee NC 28783

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61978

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 800.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Mark Cody | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 11952 Big Laurel Road | | Transaction ID: 61016.C61952 | |
| City State Zip Code Marshall NC 28753 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Self Occupation Farmer | Aggregate Year-to-Date ▼ 200.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Finesse Couch | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 8220 Hwy 751 South | | Transaction ID: 61007.C61539 | |
| City State Zip Code Durham NC 27713 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer State of NC Occupation Attorney | Aggregate Year-to-Date ▼ 300.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Marion Cowell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address PO Box 36012 | | Transaction ID: 61007.C61554 | |
| City State Zip Code Charlotte NC 28236 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Kilpatrick Stockton LLP Occupation Attorney | Aggregate Year-to-Date ▼ 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 750.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) Fred Deaton | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 333 Gleneagles Rd. | | Transaction ID: 61007.C61601 | |
| City State Zip Code Statesville NC 28625 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Self Occupation Investments | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 500.00 | |

| | | | |
|---|--|---|--|
| B. Full Name (Last, First, Middle Initial) Debra DeBruhl | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address PO Box 216 3927 Tullulah Road | | Transaction ID: 61017.C62010 | |
| City State Zip Code Robbinsville NC 28771 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer State of North Carolina Occupation Manager | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 200.00 | |

| | | | |
|---|--|---|--|
| C. Full Name (Last, First, Middle Initial) German DeCastro | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 6337 Park South Drive | | Transaction ID: 61016.C61912 | |
| City State Zip Code Charlotte NC 28210 | | Amount of Each Receipt this Period 150.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Coltex, Inc Occupation Textile Engineer | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 650.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional) ▶ | 850.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) Johnny Deyton Mailing Address 380 Rice Road City Burnsville State NC Zip Code 28714 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C61996 Amount of Each Receipt this Period 75.00 Receipt |
| Name of Employer State of NC Occupation Probation Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 75.00 | | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) Johnny Deyton Mailing Address 380 Rice Road City Burnsville State NC Zip Code 28714 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62000 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer State of NC Occupation Probation Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00 | | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) J. Wilbert Edgerton Mailing Address 6100 W. Friendly Ave. Apt. 2312 City Greensboro State NC Zip Code 27410-4056 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61552 Amount of Each Receipt this Period 100.00 Receipt |
| Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | |
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| SUBTOTAL of Receipts This Page (optional) | 375.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Charles Evans | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address P.O. Box 2239 | | Transaction ID: 61010.C61693 | |
| City Manteo | State NC | Zip Code 27954 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Kellogg & Evans, PA | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Massimo Fantechi | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 1808 Carlisle Rd. | | Transaction ID: 61007.C61596 | |
| City Greensboro | State NC | Zip Code 27408 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Twisted Paper | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Nancy Evans Fish | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 1125 Soco Road | | Transaction ID: 61017.C61988 | |
| City Maggie Valley | State NC | Zip Code 28751 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | | |

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| SUBTOTAL of Receipts This Page (optional) ▶ | 550.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Bill Forsyth

Mailing Address P.O. Box 171

City State Zip Code
Murphy NC 28906

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

Name of Employer Cherokee County Occupation Economic Development Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62046

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Willis J. Fowler

Mailing Address 42116 Live Oak Rd.

City State Zip Code
Raleigh NC 27604

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

Name of Employer NC Parole Commission Occupation Commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61527

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Francis

Mailing Address 50 Mayo Mountain Road

City State Zip Code
Waynesville NC 28786

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

Name of Employer Harrahs Cherokee Casino Occupation Gaming Host

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62047

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Hugh Franklin Mailing Address Box 593 City Marion State NC Zip Code 28752 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61016.C61970 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) David Gantt Mailing Address 28 Troy Hill Dr. City Fletcher State NC Zip Code 28732 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61625 Amount of Each Receipt this Period 1000.00 Receipt |
| Name of Employer David Gantt Law Office Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) David Gantt Mailing Address 28 Troy Hill Dr. City Fletcher State NC Zip Code 28732 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62027 Amount of Each Receipt this Period 100.00 Receipt |
| Name of Employer David Gantt Law Office Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00 | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Ronald Garrett

Mailing Address 601 Courthouse Dr.

City State Zip Code
Morrisville NC 27560

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

Name of Employer Occupation
Tekelec Business Development Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61930

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
B. Stephenson Goss

Mailing Address 166 Morningside Dr.

City State Zip Code
Boone NC 28607

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

Name of Employer Occupation
Self Minister

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61852

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
R. Marshall Green, Jr.

Mailing Address P.O. Box 18135

City State Zip Code
Asheville NC 28814

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62045

Amount of Each Receipt this Period
500.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) D.H. Griffin, Sr. Mailing Address 2022 Shimer Dr. City State Zip Code Jamestown NC 27282 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61597 Amount of Each Receipt this Period 250.00 Receipt |
| Name of Employer Occupation D.H. Griffin Wrecking Co. Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Arthenia G. Hall Mailing Address 656 S Old NC 903 Hwy City State Zip Code Magnolia NC 28453 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61520 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Wade Hall Mailing Address 233 South Liberty City State Zip Code Asheville NC 28801 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62011 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer Occupation Self Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00 | | |

| | |
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| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Cameron Harris | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | |
| Mailing Address 3247 Seven Eagles | | Transaction ID: 61013.C61823 | |
| City State Zip Code Charlotte NC 28210 | | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Wachovia Securities Director | | Aggregate Year-to-Date ▼ 6000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Richard & Beverly Hester | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | |
| Mailing Address 1317 Greenside Dr. | | Transaction ID: 61013.C61813 | |
| City State Zip Code Raleigh NC 27609 | | Amount of Each Receipt this Period 150.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Triangle Pastoral Counseling, Pastoral Counselor | | Aggregate Year-to-Date ▼ 250.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Mary Hill | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 610 Greenwood Dr. | | Transaction ID: 61007.C61530 | |
| City State Zip Code Chapel Hill NC 27514 | | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Retired Retired | | Aggregate Year-to-Date ▼ 100.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5250.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 97 |
| | <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 | |

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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Mary Hill

Mailing Address 610 Greenwood Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61566

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frank B. Holding

Mailing Address 519 Rosewood Dr.

City State Zip Code
Smithfield NC 27577

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61572

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Irene Hooper

Mailing Address PO Box 2317

City State Zip Code
Cullowhee NC 28723

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61977

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Luke Hyde

Mailing Address 1302 Westfield Ave.

City Raleigh State NC Zip Code 27607-6839

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61981

Amount of Each Receipt this Period
350.00

Receipt

B. Full Name (Last, First, Middle Initial)
James C. Jackson

Mailing Address 77 Chestnut St. #301

City Tryon State NC Zip Code 28782

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61994

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Clark Jenkins

Mailing Address PO Box 310

City Tarboro State NC Zip Code 27886

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

Name of Employer State of North Carolina Occupation Senator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: 61003.C61507

Amount of Each Receipt this Period
1250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1800.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Willore Jobe | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address Rt 6, Box 974 | | Transaction ID: 61017.C62006 | |
| City Burnsville | State NC | Zip Code 28714 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Yancey County | Occupation Register of Deeds | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Adolph A. Justice, Jr. | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 1995 Highway 226 South | | Transaction ID: 61016.C61927 | |
| City Marion | State NC | Zip Code 28752 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer McDowell County | Occupation Social Worker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Hal Kaplan | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address P.O. Box 609 | | Transaction ID: 61007.C61555 | |
| City Lewisville | State NC | Zip Code 27023 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Kaplan Companies | Occupation Manager | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 900.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Charles Kaufman

Mailing Address 114 Fairway Dr.

City State Zip Code
Black Mountain NC 28711

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

Name of Employer Information Requested Occupation
CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62034

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Annie Brown Kennedy

Mailing Address 3727 Spaulding Drive

City State Zip Code
Winston Salem NC 27105

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

Name of Employer Kennedy, Kennedy, Kennedy LLP Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61913

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
J.W. Kirk

Mailing Address 1224 John Kirk Drive

City State Zip Code
Charlotte NC 28262

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

Name of Employer Kirk Capital Corp. Occupation
President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61687

Amount of Each Receipt this Period
200.00

Receipt

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 900.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | |
|--|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 97 | | |
| | <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Bobby Kuppers

Mailing Address 176 Forest Hills Drive

City State Zip Code
Franklin NC 28734

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61980

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
ARNOLD LAKEY

Mailing Address 192 E MAGNOLIA RD

City State Zip Code
NORTH WILKESBORO NC 28659

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61561

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
ARNOLD LAKEY

Mailing Address 192 E MAGNOLIA RD

City State Zip Code
NORTH WILKESBORO NC 28659

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: 61020.C62092

Amount of Each Receipt this Period
500.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Bennett LeBow | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 | |
| Mailing Address 100 SE 2nd Street | | Transaction ID: 61003.C61498 | |
| City State Zip Code Miami FL 33131 | Amount of Each Receipt this Period 5000.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Liggett Group | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. James Ledford | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 1089 Old Mars Hill Hwy | | Transaction ID: 61007.C61599 | |
| City State Zip Code Weaverville NC 28787 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Ledford Enterprises, Inc. | Occupation Auto Repair | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kathleen Leutze | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | |
| Mailing Address 4 St. James Place | | Transaction ID: 61013.C61886 | |
| City State Zip Code Chapel Hill NC 27514 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
B. Paul Lindsay

Mailing Address 100 Glendale Dr

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61868

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Mann, Sr.

Mailing Address 189 Treecutters Lane

City State Zip Code
Sanford NC 27330

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

Name of Employer NC State DOC Occupation Chairman Parole Commission

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61528

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Donna Marks

Mailing Address 1 Palatka Dr.

City State Zip Code
Arden NC 28704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62012

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

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

| | | | | |
|--|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 / 97 | | |
| | <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
William Mast

Mailing Address 1910 Ross Mill Rd.

City Henderson State NC Zip Code 27537

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

Name of Employer Self Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61521

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
E.J. Mathis

Mailing Address 55 Crab Apple Lane

City Arden State NC Zip Code 28704-8721

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62030

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Betty McCain

Mailing Address 1134 Woodland Drive

City Wilson State NC Zip Code 27893

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61565

Amount of Each Receipt this Period
100.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Robert McCollum

Mailing Address 218 Low Brace Road

City Franklin State NC Zip Code 28734

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

Name of Employer USDA - Forest Service Occupation Researcher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C61975

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Wayne McDevitt

Mailing Address P.O. Box 63

City Marshall State NC Zip Code 28753

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

Name of Employer UNC Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61916

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Glenna McIntosh

Mailing Address 157 Old Drive In Drive

City Burnsville State NC Zip Code 28714

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62004

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 900.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Glenna McIntosh

Mailing Address 157 Old Drive In Drive

City State Zip Code
Burnsville NC 28714

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62043

Amount of Each Receipt this Period
125.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marsh McLelland

Mailing Address 2018 Nottingham Lane

City State Zip Code
Burlington NC 27215

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61569

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stephen Metcalf

Mailing Address 26 Highland Pointe Drive

City State Zip Code
Weaverville NC 28787

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

Name of Employer Self Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61915

Amount of Each Receipt this Period
300.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 525.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Chester P. Middlesworth

Mailing Address 626 Wood Bridge Rd.

City Statesville State NC Zip Code 28625

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61696

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Judy Miller

Mailing Address 71 Mimosa Way

City Hendersonville State NC Zip Code 28739

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61926

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Margaret Miller

Mailing Address 204 Ellington St

City Fayetteville State NC Zip Code 28305

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61682

Amount of Each Receipt this Period
1000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1450.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Charles Monnett, III

Mailing Address 4033 Arbor Way

City State Zip Code
Charlotte NC 28211

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5237.50

Date of Receipt
MM / DD / YYYY
10 / 18 / 2006

Transaction ID: 61020.C62093

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joann Morgan

Mailing Address 141 Flint Hill Road

City State Zip Code
Alexander NC 28701

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

Name of Employer Buncombe County Occupation Asst. Register of Deeds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2006

Transaction ID: 61017.C62044

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joann Morgan

Mailing Address 141 Flint Hill Road

City State Zip Code
Alexander NC 28701

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

Name of Employer Buncombe County Occupation Asst. Register of Deeds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2006

Transaction ID: 61017.C62008

Amount of Each Receipt this Period
200.00

Receipt

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5300.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Ruby Murchison Mailing Address 701 Topeka Street City Fayetteville State NC Zip Code 28301 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61600 Amount of Each Receipt this Period 250.00 Receipt |
| Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 | | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) Richard Osborne Mailing Address 2025 Nolen Park Lane City Charlotte State NC Zip Code 28209 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61559 Amount of Each Receipt this Period 500.00 Receipt |
| Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Mary Ebert Ostgaard Mailing Address 461 Hidden Springs Dr. City Marion State NC Zip Code 28752 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61016.C61971 Amount of Each Receipt this Period 100.00 Receipt |
| Name of Employer McDowell County Occupation Speech Pathologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 155.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 35 / 97 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | |
|---|----------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Mary Ebert Ostgaard | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 461 Hidden Springs Dr. | | Transaction ID: 61016.C61972 | |
| City State Zip Code Marion NC 28752 | | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer McDowell County | Occupation Speech Pathologist | Aggregate Year-to-Date ▼ 255.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Linda Penland-Freels | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 121 North Ridge Dr. #A | | Transaction ID: 61017.C62017 | |
| City State Zip Code Asheville NC 28804 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Home 123 Mortgage Corp | Occupation Branch Manager | Aggregate Year-to-Date ▼ 200.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-----------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Carol Peterson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 221 Racquet Club Road | | Transaction ID: 61017.C62022 | |
| City State Zip Code Asheville NC 28803 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | Aggregate Year-to-Date ▼ 200.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Marvin Pope Mailing Address PO Box 701 City Asheville State NC Zip Code 28802 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62021 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer State of NC Occupation Judge Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Sidney Popkin Mailing Address 125 Brookview Drive City Jacksonville State NC Zip Code 28540 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61013.C61878 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) Milo Pyne Mailing Address 806 Vickers Avenue City Durham State NC Zip Code 27701 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 Transaction ID: 61003.C61486 Amount of Each Receipt this Period 20.00 Receipt |
| Name of Employer Nature Serve Occupation Ecologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 420.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Raymond Rapp

Mailing Address 133 Quail Ridge Road

City Mars Hill State NC Zip Code 28754

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

Name of Employer Mars Hill College Occupation Dean

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61953

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eddie Ratliff

Mailing Address 130 Shadow Lane

City Bristol State VA Zip Code 24209

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

Name of Employer Self Occupation Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61017.C62064

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jack Roberts

Mailing Address 649 Bailey Branch Road

City Mars Hill State NC Zip Code 28754

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C61956

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 600.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
James Robinson

Mailing Address 412 Hickory Lane

City State Zip Code
Burnsville NC 28714

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

Name of Employer Occupation
NC Dept of Transportation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62060

Amount of Each Receipt this Period
400.00

Receipt

B. Full Name (Last, First, Middle Initial)
R. Vernell Rodgers

Mailing Address P.O. Box 709

City State Zip Code
Windsor NC 27983

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

Name of Employer Occupation
Solid Foundation Facilities, I Mental Health Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61542

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dalton Ruffin

Mailing Address 2841 Galsworthy Dr.

City State Zip Code
Winston Salem NC 27106

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61573

Amount of Each Receipt this Period
500.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1400.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Kelly Sechrist

Mailing Address 986 Ravens Ridge Cir.

City State Zip Code
Boone NC 28607

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61864

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frank Shaw

Mailing Address 202 Devane St.

City State Zip Code
Fayetteville NC 28305

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61695

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Beth Sibley

Mailing Address 822 W. Double Shoals Rd.

City State Zip Code
Lawndale NC 28090

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61017.C62052

Amount of Each Receipt this Period
75.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 475.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Kathleen Sinclair Mailing Address 44 Hill Creek Dr. City Asheville State NC Zip Code 28804 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62039 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer: NC Employment Security Co-mmiss Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) Jill Sizemore Mailing Address 7 N. Oak Forest Drive City Asheville State NC Zip Code 28803 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62020 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer: Self Occupation: Manufacture Boutique Accessori Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Pat Smathers Mailing Address 118 Main St. Suite B City Canton State NC Zip Code 28716 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: 61020.C62102 Amount of Each Receipt this Period 200.00 Receipt |
| Name of Employer: Self Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 600.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | | | | | |
|--|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 41 / 97 | | | | | | |
| | (check only one) | | | | | | | |
| | <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Robert B. Smith, Jr.

Mailing Address P.O. Box 1734

City State Zip Code
Lexington NC 27293

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

Name of Employer Occupation
Smith Gamblin Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61688

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Linda Stephens

Mailing Address 5524 N Hills Dr

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
State of North Carolina Judge

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61674

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lois Stephenson

Mailing Address P.O. Box 1379

City State Zip Code
Clayton NC 27528

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

Name of Employer Occupation
Building Blocks Child Care Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61887

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) A. J. David Stradley | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 510 Franklin St. | | Transaction ID: 61007.C61606 | |
| City Raleigh | State NC | Zip Code 27604 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer White & Stradley | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Tom Sullivan | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 16 Mt. Vernon Cir. | | Transaction ID: 61017.C62053 | |
| City Asheville | State NC | Zip Code 28804 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Southern Design | Occupation Consulting Engineer | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. John Tate, Jr. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 332 Lockley Drive | | Transaction ID: 61007.C61567 | |
| City Charlotte | State NC | Zip Code 28207 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. John A. Taylor | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 611 Lankshire Rd. | | Transaction ID: 61007.C61571 |
| City State Zip Code Winston Salem NC 27106 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Carol J. Teal | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 3109 Cartwright Dr. | | Transaction ID: 61013.C61815 |
| City State Zip Code Raleigh NC 27612 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Financial Advisor Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Henry Teich | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 12 Woodley Avenue | | Transaction ID: 61007.C61607 |
| City State Zip Code Asheville NC 28804 | Amount of Each Receipt this Period 1600.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Grimes & Teich Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Aggregate Year-to-Date ▼ 1600.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2600.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 44 / 97 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Andrew Terrell

Mailing Address 5704 Old Forge Circle

City Raleigh State NC Zip Code 27609

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

Name of Employer State of NC Occupation Parole Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61526

Amount of Each Receipt this Period
 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Larry Turnbow

Mailing Address 202 Flannery Fork Rd.

City Blowing Rock State NC Zip Code 28605

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61855

Amount of Each Receipt this Period
 1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Leandra Vicci

Mailing Address 2940 Mt. Vernon HMR

City Siler City State NC Zip Code 27344

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

Name of Employer UNC-CH Occupation Lecturer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61590

Amount of Each Receipt this Period
 100.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Alvin Volkman | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6 | |
| Mailing Address 1324 Forest Acres Dr. | | Transaction ID: 61020.C62087 | |
| City Greenville | State NC | Zip Code 27834 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Charles Waldren | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 644 Fearrington Post | | Transaction ID: 61010.C61700 | |
| City Pittsboro | State NC | Zip Code 27312 | Amount of Each Receipt this Period 150.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Thomas Warlick | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address PO Box 267 | | Transaction ID: 61007.C61589 | |
| City Newton | State NC | Zip Code 28658 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Self | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 350.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | |
|--|------------------------------|-----------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 46 / 97 |
| <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)
North Carolina Democratic Party - Federal

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) Jane K. Whilden Mailing Address 8 Busbee Rd. City Asheville State NC Zip Code 28803 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: 61017.C62018 Amount of Each Receipt this Period 250.00 Receipt |
| Name of Employer: State of North Carolina Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 | | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) W. Ray White Mailing Address P.O. Box 922 City Manteo State NC Zip Code 27954 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61007.C61602 Amount of Each Receipt this Period 500.00 Receipt |
| Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) James Wilson Mailing Address 320 N. Oakwood Dr. City Statesville State NC Zip Code 28677 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: 61010.C61697 Amount of Each Receipt this Period 500.00 Receipt |
| Name of Employer: Wilson Building Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 / 97 |
| | <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Bobby R. Winston

Mailing Address 1038 Irongate Dr.

City State Zip Code
Apex NC 27502

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61551

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Winston

Mailing Address 2626 Glenwood Avenue; Suite 200

City State Zip Code
Raleigh NC 27608

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

Name of Employer Winston Hotels Occupation Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61525

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Susan Wittington

Mailing Address 4023 Boone Trail

City State Zip Code
North Wilkesboro NC 28659

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

Name of Employer NY Life Occupation Financial Advisor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: 61013.C61861

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 600.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 / 97 |
| | <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)
North Carolina Democratic Party - Federal

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Martha Woody | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 542 Reed Cove Rd. | | Transaction ID: 61017.C61987 | |
| City State Zip Code Waynesville NC 28786 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired Occupation Retired | Aggregate Year-to-Date ▼ 200.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Larry N. Wright | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 17 Exeter Dr. | | Transaction ID: 61007.C61538 | |
| City State Zip Code Candler NC 28715 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Wright Land Services Occupation Real Estate Appraiser | Aggregate Year-to-Date ▼ 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Smedes York | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address P.O. Box 10007 | | Transaction ID: 61010.C61686 | |
| City State Zip Code Raleigh NC 27605 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer York Properties Occupation President | Aggregate Year-to-Date ▼ 2400.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

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|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1450.00 |
| TOTAL This Period (last page this line number only) ▶ | 55670.00 |

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

| | | | | | | | | |
|--|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 49 / 97 | | | | | | |
| | (check only one) | | | | | | | |
| | <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Bank of America Corporation PAC | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6 | |
| Mailing Address 600 Peachtree St., NE 3rd Floor | | Transaction ID: 61020.C62098 | |
| City State Zip Code Atlanta GA 30308 | Amount of Each Receipt this Period 4000.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 4000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Bob Etheridge for Congress Committee | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address P.O. Box 28001 | | Transaction ID: 61010.C61679 | |
| City State Zip Code Raleigh NC 27611-8001 | Amount of Each Receipt this Period 2000.00 | | |
| FEC ID number of contributing federal political committee. C C00311555 | | Receipt | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 26000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Brad Miller Congressional Campaign | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address PO Box 20307 | | Transaction ID: 61010.C61680 | |
| City State Zip Code Raleigh NC 27619 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00371211 | | Receipt | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 6000.00 | | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 50 / 97 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|----------|--|
| A. Full Name (Last, First, Middle Initial) Brad Miller Congressional Campaign Mailing Address PO Box 20307 City Raleigh State NC Zip Code 27619 FEC ID number of contributing federal political committee. C C00371211 Name of Employer Excess Campaign Funds Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 36000.00 | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61010.C61681 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">30000.00</td> </tr> </table> Receipt | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 1 | 0 | | 2 | 0 | 0 | 6 | 30000.00 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | | |
| 30000.00 | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|--|
| B. Full Name (Last, First, Middle Initial) Emilys List Mailing Address 1120 Connecticut Avenue, NW Suite 1100 City Washington State DC Zip Code 20036 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 ▼ 3624.82 | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61017.C62061 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">1403.38</td> </tr> </table> In-Kind Staff Salary and Expenses | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 1 | 3 | | 2 | 0 | 0 | 6 | 1403.38 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 1 | 0 | | 1 | 3 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | | |
| 1403.38 | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|--|
| C. Full Name (Last, First, Middle Initial) IBEW - COPE Mailing Address 1125 15th St, NW City Washington State DC Zip Code 20005 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 ▼ 5000.00 | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61016.C61932 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">5000.00</td> </tr> </table> Receipt | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 6 | 5000.00 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 36403.38 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | |
|--|------------------------------|---|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 51 / 97 | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <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)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Price for Congress

Mailing Address P.O. Box 1986

City Raleigh State NC Zip Code 27602

FEC ID number of contributing federal political committee. **C** C00195628

Name of Employer Excess Campaign Funds Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 45000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61007.C61620

Amount of Each Receipt this Period
 19000.00

Receipt

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 19000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 62403.38 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 / 97 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
North Carolina Democratic Party - Federal

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Democratic National Committee | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, SE | | Transaction ID: 61007.C61622 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 20000.00 | |
| FEC ID number of contributing federal political committee. C | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 75000.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Democratic National Committee | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, SE | | Transaction ID: 61007.C61621 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 85000.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Democratic National Committee | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, SE | | Transaction ID: 61010.C61699 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 20000.00 | |
| FEC ID number of contributing federal political committee. C | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 105000.00 | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 50000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 / 97 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
North Carolina Democratic Party - Federal

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Democratic National Committee | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, SE | | Transaction ID: 61013.C61865 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 15000.00 | |
| FEC ID number of contributing federal political committee. C | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 120000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Cmte. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, S.E. | | Transaction ID: 61003.C61508 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 313904.00 | |
| FEC ID number of contributing federal political committee. C C00000935 | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 470304.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Cmte. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street, S.E. | | Transaction ID: 61003.C61509 |
| City State Zip Code Washington DC 20003- | Amount of Each Receipt this Period 25000.00 | |
| FEC ID number of contributing federal political committee. C C00000935 | Transfers From Affil./Aut-h. | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 495304.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 353904.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 / 97 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Cmte. Mailing Address 430 South Capitol Street, S.E. City State Zip Code Washington DC 20003- | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 Transaction ID: 61007.C61510 Amount of Each Receipt this Period 25000.00 Transfers From Affil./Aut-h. |
| FEC ID number of contributing federal political committee. C C00000935 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520304.00 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Cmte. Mailing Address 430 South Capitol Street, S.E. City State Zip Code Washington DC 20003- | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: 61025.C62251 Amount of Each Receipt this Period 35000.00 Transfers From Affil./Aut-h. |
| FEC ID number of contributing federal political committee. C C00000935 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 555304.00 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Cmte. Mailing Address 430 South Capitol Street, S.E. City State Zip Code Washington DC 20003- | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61016.C61896 Amount of Each Receipt this Period 216477.00 Transfers From Affil./Aut-h. |
| FEC ID number of contributing federal political committee. C C00000935 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 771781.00 | | |

| | | |
|--|---|-----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 276477.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 55 / 97 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 12 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Cmte.

Mailing Address 430 South Capitol Street, S.E.

City State Zip Code
Washington DC 20003-

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
790781.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61020.C62075

Amount of Each Receipt this Period
19000.00

Transfers From Affil./Auto-h.

B. Full Name (Last, First, Middle Initial)
ASDC Partnership Program - Affinity Card

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003-

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3171.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61010.C61698

Amount of Each Receipt this Period
650.39

Transfers From Affil./Auto-h.

| | | |
|--|---|-----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 19650.39 |
| TOTAL This Period (last page this line number only) | ▶ | 700031.39 |

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)

PAGE 56 / 97

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|---|--|--|
| A. Corporate Press, Inc. Full Name (Last, First, Middle Initial) Mailing Address PO Box 1 City Garner State NC Zip Code 27529- Purpose of Disbursement 1000.25/PRINTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52614 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 571.36 1000.25/PRINTING |
| B. Embarq Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 96064 City Charlotte State NC Zip Code 28296- Purpose of Disbursement 1000.41/TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52619 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 35.44 1000.41/TELEPHONE |
| C. Arizona Democratic Party Federal Account Full Name (Last, First, Middle Initial) Mailing Address 2910 North Central Avenue City Phoenix State AZ Zip Code 85012- Purpose of Disbursement 1000.29/CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52632 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 225000.00 1000.29/CONTRIBUTION |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 225606.80 |
| 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"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Fairjudges.net | | Transaction ID: 61013.E52724 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 2839 Barmettler St. | | Amount of Each Disbursement this Period 25000.00 |
| City Raleigh State NC Zip Code 27607- | Purpose of Disbursement 6000.50/CONTRIBUTION Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 6000.50/CONTRIBUTION |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Fairjudges.net | | Transaction ID: 61013.E52729 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 2839 Barmettler St. | | Amount of Each Disbursement this Period 25000.00 |
| City Raleigh State NC Zip Code 27607- | Purpose of Disbursement 5000.50/CONTRIBUTION Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 5000.50/CONTRIBUTION |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Emilys List | | Transaction ID: 61017.C62061IK Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 1120 Connecticut Avenue, NW Suite 1100 | | Amount of Each Disbursement this Period 1403.38 |
| City Washington State DC Zip Code 20036- | Purpose of Disbursement STAFF SALARY AND EXPENSES Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | IN KIND: STAFF SALARY AND EXPENSES |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 51403.38 |
| 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)

PAGE 58 / 97

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| A. Mark Hufford Full Name (Last, First, Middle Initial) Mailing Address 7200 Rhododendron Drive City Newland State NC Zip Code 28657- Purpose of Disbursement 1000.41/USE OF PERSONAL PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52606 Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 50.00 1000.41/USE OF PERSONAL PHONE |
|--|--|--|

| | | |
|---|--|--|
| B. Mark Hufford Full Name (Last, First, Middle Initial) Mailing Address 7200 Rhododendron Drive City Newland State NC Zip Code 28657- Purpose of Disbursement 1000.41/TRAVEL/MILEAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52604 Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 558.60 1000.41/TRAVEL/MILEAGE |
|---|--|--|

| | | |
|--|--|---|
| C. Mark Hufford Full Name (Last, First, Middle Initial) Mailing Address 7200 Rhododendron Drive City Newland State NC Zip Code 28657- Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: 61007.E52605 Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 212.85 SEE BELOW |
|--|--|---|

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 821.45 |
| 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)

PAGE 59 / 97

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Marc Pruett | | Transaction ID: 61013.E52723 Date of Disbursement 10 / 13 / 2006 | |
| Mailing Address 390 Mosey Mountain Lane | | Amount of Each Disbursement this Period 650.00 | |
| City Canton State NC Zip Code 28716- | Purpose of Disbursement 1000.25/MUSIC Candidate Name Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Kristen Ward | | Transaction ID: 61013.E52704 Date of Disbursement 10 / 13 / 2006 | |
| Mailing Address 3544 Apache Dr. | | Amount of Each Disbursement this Period 50.00 | |
| City Raleigh State NC Zip Code 27609- | Purpose of Disbursement 1000.41/USE OF PERSONAL PHONE Candidate Name Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kristen Ward | | Transaction ID: 61013.E52705 Date of Disbursement 10 / 13 / 2006 | |
| Mailing Address 3544 Apache Dr. | | Amount of Each Disbursement this Period 484.75 | |
| City Raleigh State NC Zip Code 27609- | Purpose of Disbursement 1000.41/TRAVEL/MILEAGE Candidate Name Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 1184.75 |
| TOTAL This Period (last page this line number only) | 279016.38 |

**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)

PAGE 60 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|-----------------|---|
| Full Name (Last, First, Middle Initial) A. Bates Neimand | | Transaction ID: 61013.E52727 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 1025 Vermont Avenue, NW Suite 830 | | Amount of Each Disbursement this Period 14391.72 |
| City Washington State DC Zip Code 20005- | FEA/DIRECT MAIL | |
| Purpose of Disbursement FEA/DIRECT MAIL Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------|---|
| Full Name (Last, First, Middle Initial) B. Bates Neimand | | Transaction ID: 61013.E52731 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 1025 Vermont Avenue, NW Suite 830 | | Amount of Each Disbursement this Period 14391.72 |
| City Washington State DC Zip Code 20005- | FEA/DIRECT MAIL | |
| Purpose of Disbursement FEA/DIRECT MAIL Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------|---|
| Full Name (Last, First, Middle Initial) C. Strategy Group, The | | Transaction ID: 61013.E52725 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 730 N Franklin Street Suite 601 | | Amount of Each Disbursement this Period 11997.91 |
| City Chicago State IL Zip Code 60610- | FEA/DIRECT MAIL | |
| Purpose of Disbursement FEA/DIRECT MAIL Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 40781.35 |
| 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)

PAGE 61 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) NTS, Inc | | Transaction ID: 61013.E52722 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 122 C Street, NW Suite 640 | | Amount of Each Disbursement this Period 71540.00 |
| City Washington State DC Zip Code 20001- | FEA/VOTER ID CALLS | |
| Purpose of Disbursement FEA/VOTER ID CALLS | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| B. Full Name (Last, First, Middle Initial) NTS, Inc | | Transaction ID: 61013.E52730 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 122 C Street, NW Suite 640 | | Amount of Each Disbursement this Period 35000.00 |
| City Washington State DC Zip Code 20001- | FEA/TELEPHONE CALLS | |
| Purpose of Disbursement FEA/TELEPHONE CALLS | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| C. Full Name (Last, First, Middle Initial) NTS, Inc | | Transaction ID: 61013.E52726 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 122 C Street, NW Suite 640 | | Amount of Each Disbursement this Period 35000.00 |
| City Washington State DC Zip Code 20001- | FEA/TELEPHONE CALLS | |
| Purpose of Disbursement FEA/TELEPHONE CALLS | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ▶

141540.00

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)

PAGE 62 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|---|
| A. NTS, Inc Full Name (Last, First, Middle Initial) Mailing Address 122 C Street, NW Suite 640 City Washington State DC Zip Code 20001- | | Transaction ID: 61017.E52765 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Purpose of Disbursement FEA/TELEPHONE CALLS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Amount of Each Disbursement this Period 15000.00 FEA/TELEPHONE CALLS |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

| | | |
|--|--|---|
| B. North Carolina Press Services, Inc. Full Name (Last, First, Middle Initial) Mailing Address 5171 Glenwood Avenue Suite 364 City Raleigh State NC Zip Code 27612- | | Transaction ID: 61020.E52769 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Purpose of Disbursement FEA/NEWSPAPER ADVERTISING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Amount of Each Disbursement this Period 15082.83 FEA/NEWSPAPER ADVERTISING |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

| | | |
|--|--|---|
| C. Voter Activation Network Full Name (Last, First, Middle Initial) Mailing Address 54 Regent Street City Cambridge State MA Zip Code 02140- | | Transaction ID: 61007.E52633 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Purpose of Disbursement FEA/VOTER FILE CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Amount of Each Disbursement this Period 5000.00 FEA/VOTER FILE CONSULTING |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 35082.83 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

PAGE 63 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Thirdeye Studio | | Transaction ID: 61007.E52611 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address P.O. Box 41532 | | Amount of Each Disbursement this Period 2654.00 |
| City Raleigh State NC Zip Code 27629- | FEA/PRINTING/DOOR HANGERS | |
| Purpose of Disbursement FEA/PRINTING/DOOR HANGERS | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ourso Beychok Johnson | | Transaction ID: 61013.E52720 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 352 Napoleon St. | | Amount of Each Disbursement this Period 75472.00 |
| City Baton Rouge State LA Zip Code 70802- | FEA/DIRECT MAIL | |
| Purpose of Disbursement FEA/DIRECT MAIL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. The Independent | | Transaction ID: 61017.E52766 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 610 W. Johnson St. | | Amount of Each Disbursement this Period 1147.00 |
| City Raleigh State NC Zip Code 27603- | FEA/NEWSPAPER ADVERTISE- MENT | |
| Purpose of Disbursement FEA/NEWSPAPER ADVERTISEMENT | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 79273.00 |
| 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)

PAGE 64 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. LUC Media | | Transaction ID: 61020.E52774 Date of Disbursement 10 / 18 / 2006 | |
| Mailing Address 25 Whitlock Place, #201 | | Amount of Each Disbursement this Period 50000.00 | |
| City Marietta State GA Zip Code 30064- | Purpose of Disbursement FEA/GOTV RADIO Candidate Name <input type="checkbox"/> Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA/GOTV RADIO | | |

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. Seligman Group | | Transaction ID: 61007.E52595 Date of Disbursement 10 / 06 / 2006 | |
| Mailing Address c/o Banyan Rock & Talent 3356 Six Forks Road | | Amount of Each Disbursement this Period 375.00 | |
| City Raleigh State NC Zip Code 27609- | Purpose of Disbursement FEA/PAYRL/WILKES(\$125)/WIENER(\$250) Candidate Name <input type="checkbox"/> Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA/PAYRL/WILKES(\$125)/WIENER(\$250) | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Daryl Ball | | Transaction ID: 61003.E52586 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 102 Logan Ct. Apt. 3 | | Amount of Each Disbursement this Period 750.00 | |
| City Raleigh State NC Zip Code 27607- | Purpose of Disbursement FEA/PAYROLL/1099 Candidate Name <input type="checkbox"/> Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA/PAYROLL/1099 | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 51125.00 |
| 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Daryl Ball | | Transaction ID: 61020.E52801 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address 102 Logan Ct. Apt. 3 | | Amount of Each Disbursement this Period 1125.00 |
| City Raleigh State NC Zip Code 27607- | Purpose of Disbursement FEA/PAYROLL/1099 | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FEA/PAYROLL/1099 |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tara Ilsley | | Transaction ID: 61020.E52800 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address Box 15274 Bragaw Hall, NCSU | | Amount of Each Disbursement this Period 600.00 |
| City Raleigh State NC Zip Code 27607- | Purpose of Disbursement FEA/CAVASSING WORK | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FEA/CAVASSING WORK |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. United States Postal Service | | Transaction ID: 61013.E52732 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address Capitol Station 311 New Bern Avenue | | Amount of Each Disbursement this Period 7000.00 |
| City Raleigh State NC Zip Code 27601- | Purpose of Disbursement FEA/POSTAGE | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FEA/POSTAGE |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8725.00 |
| 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)

PAGE 66 / 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. United States Postal Service | | Transaction ID: 61013.E52721 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address Capitol Station 311 New Bern Avenue | | Amount of Each Disbursement this Period 40000.00 |
| City Raleigh | State NC | |
| Zip Code 27601- | Purpose of Disbursement FEA/POSTAGE | FEA/POSTAGE |
| 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. United States Postal Service | | Transaction ID: 61013.E52728 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address Capitol Station 311 New Bern Avenue | | Amount of Each Disbursement this Period 10343.13 |
| City Raleigh | State NC | |
| Zip Code 27601- | Purpose of Disbursement FEA/POSTAGE | FEA/POSTAGE |
| 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: | | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 50343.13 |
| TOTAL This Period (last page this line number only) | 406870.31 |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|---|--------------------|---|---------------------------------|
| Full Name (Last, First, Middle Initial) of Each Payee Office Max | [MEMO ITEM] | Purpose of Expenditure Office Supplies/-Pd to BB&T Bankcard Office Supplies/Pd to BB&T Bankcard | Category/Type |
| Mailing Address 107 B River Hills Road | | | |
| City Asheville | State NC | ZIP Code 28805 | |
| Name of Federal Candidate Supported | Office Sought: | House Senate Presidential | State: _____ District: _____ |
| Aggregate General Election Expenditure for this Candidate ▶ | | 0.00 | |
| | | Transaction ID: 61010.E52696 | |

| | | | |
|--|----------------|--|---|
| Full Name (Last, First, Middle Initial) of Each Payee BB&T Bankcard Corporation | | Purpose of Expenditure Office Supplies 001 | 001 Category/Type |
| Mailing Address PO Box 580363 | | | |
| City Charlotte | State NC | ZIP Code 28258 | |
| Name of Federal Candidate Supported | Office Sought: | House Senate Presidential | State: <u>NC</u> District: <u>11</u> |
| SHULER, JOSEPH HEATH | | | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | |
| | | Transaction ID: 61010.E52690 | |

| | | | |
|--|--------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Each Payee BB&T Bankcard Corporation | [MEMO ITEM] | Purpose of Expenditure Bank Fee/Pd to BB&T Bankcard | Category/Type |
| Mailing Address PO Box 580363 | | Bank Fee/Pd to BB&T Bankcard | |
| City Charlotte | State NC | ZIP Code 28258 | |
| Name of Federal Candidate Supported | Office Sought: | House Senate Presidential | State: _____ District: _____ |
| Aggregate General Election Expenditure for this Candidate ▶ | | 0.00 | |
| | | Transaction ID: 61010.E52691 | |

| | |
|--|---------------|
| SUBTOTAL of Expenditures This Page (optional) | 515.53 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|----------------|---|-----------------|
| Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Best Buy | | Purpose of Expenditure Office Supplies/- Pd to BB&T Bankcard Office Supplies/Pd to BB&T Bankcard | Category/Type |
| Mailing Address 83 S Tunnel Road | | | |
| City | State | ZIP Code | |
| Asheville | NC | 28805 | |
| Name of Federal Candidate Supported | Office Sought: | House | State: _____ |
| | | Senate | District: _____ |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate | 0.00 | | |
| Transaction ID: 61010.E52692 | | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|--|----------------|---|-----------------|
| Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Home Depot | | Purpose of Expenditure Office Supplies/- Pd to BB&T Bankcard Office Supplies/Pd to BB&T Bankcard | Category/Type |
| Mailing Address 795 Fairview Road | | | |
| City | State | ZIP Code | |
| Asheville | NC | 28803 | |
| Name of Federal Candidate Supported | Office Sought: | House | State: _____ |
| | | Senate | District: _____ |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate | 0.00 | | |
| Transaction ID: 61010.E52694 | | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|--|----------------|---|-----------------|
| Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Wal Mart | | Purpose of Expenditure Office Supplies/- Pd to BB&T Bankcard Office Supplies/Pd to BB&T Bankcard | Category/Type |
| Mailing Address 125 Bleachery Blvd. | | | |
| City | State | ZIP Code | |
| Asheville | NC | 28805 | |
| Name of Federal Candidate Supported | Office Sought: | House | State: _____ |
| | | Senate | District: _____ |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate | 0.00 | | |
| Transaction ID: 61010.E52693 | | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | |
|--|------|
| SUBTOTAL of Expenditures This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee Buying Time, LLC | | Purpose of Expenditure Advertising 004 | 004 Category/Type |
| Mailing Address 2715 M St., NW | | Date MM / DD / YYYY 10 / 16 / 2006 | |
| City Washington | State DC | ZIP Code 20007 | Amount 216477.00 |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: <u>NC</u> District: <u>11</u> | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 706488.53 | | Transaction ID: 61016.E52763 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee Buying Time, LLC | | Purpose of Expenditure Advertising 004 | 004 Category/Type |
| Mailing Address 2715 M St., NW | | Date MM / DD / YYYY 10 / 03 / 2006 | |
| City Washington | State DC | ZIP Code 20007 | Amount 313904.00 |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: <u>NC</u> District: <u>11</u> | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 706488.53 | | Transaction ID: 61003.E52592 | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Grassroots Solutions | | Purpose of Expenditure Strategic Consulting 001 | 001 Category/Type |
| Mailing Address 2929 University Ave, SE Suite 100 | | Date MM / DD / YYYY 10 / 06 / 2006 | |
| City Minneapolis | State MN | ZIP Code 55414 | Amount 5000.00 |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: <u>NC</u> District: <u>11</u> | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 706488.53 | | Transaction ID: 61007.E52634 | |

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|--|------------------|
| SUBTOTAL of Expenditures This Page (optional) | 535381.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Natural Expressions in Photography & Desi | | Purpose of Expenditure Door Hangers 004 | 004 Category/Type |
| Mailing Address 174 Weston Rd. | | Date M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| City | State | ZIP Code | Amount <div style="border: 1px solid black; text-align: right; padding: 2px;">3773.80</div> |
| Arden | NC | 28704 | |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: <u>NC</u> District: <u>11</u> | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ | 706488.53 Transaction ID: 61009.E52689 | | |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) of Each Payee Native Sports | | Purpose of Expenditure T-Shirts 006 | 006 Category/Type |
| Mailing Address P.O. Box 2367 | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | |
| City | State | ZIP Code | Amount <div style="border: 1px solid black; text-align: right; padding: 2px;">920.00</div> |
| Cherokee | NC | 28719 | |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: <u>NC</u> District: <u>11</u> | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ | 706488.53 Transaction ID: 61013.E52718 | | |

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) of Each Payee Vonage | | Purpose of Expenditure Telephones/Pd to S Falmlen | Category/Type |
| Mailing Address 23 Main Street | | Telephones/Pd to S Falmlen | |
| City | State | ZIP Code | Amount <div style="border: 1px solid black; text-align: right; padding: 2px;">267.20</div> |
| Holmdel | NJ | 07733 | |
| Name of Federal Candidate Supported | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: _____ District: _____ | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ | 0.00 Transaction ID: 61013.E52755 | | |

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| SUBTOTAL of Expenditures This Page (optional) | 4693.80 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|----------------|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Benjamin Earl Allen | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 15 Colton Drive | | | |
| City | State | ZIP Code | Date |
| Leicester | NC | 28748 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: | House | State: NC |
| SHULER, JOSEPH HEATH | | Senate | District: 11 |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | Amount |
| | | Transaction ID: 61009.E52674 | 248.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|---|----------------|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Nicole Bowen | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 29 Grandview Circle | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28806 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: | House | State: NC |
| SHULER, JOSEPH HEATH | | Senate | District: 11 |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | Amount |
| | | Transaction ID: 61009.E52681 | 113.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|---|----------------|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Jessica Dunlap | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 231 Short Flint Street | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28801 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: | House | State: NC |
| SHULER, JOSEPH HEATH | | Senate | District: 11 |
| | | Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | Amount |
| | | Transaction ID: 61009.E52676 | 206.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

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|---|--------|
| SUBTOTAL of Expenditures This Page (optional) | 567.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Scott Falmlen | | Purpose of Expenditure Telephones 001 | 001 Category/Type |
| Mailing Address 2839 Barmettler Street | | | |
| City | State | ZIP Code | Date |
| Raleigh | NC | 27607 | M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 267.20 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Transaction ID: 61013.E52719 | | | |

| | | | |
|---|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Olivia Rose Fisher | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 1300 Bulldog Drive | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28801 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 126.00 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Transaction ID: 61009.E52682 | | | |

| | | | |
|--|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Hannah Furguele | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 136 Spooks Branch Road | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28804 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 79.00 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Transaction ID: 61009.E52673 | | | |

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|--|---------------|
| SUBTOTAL of Expenditures This Page (optional) | 472.20 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|--|--|----------------------|
| Full Name (Last, First, Middle Initial) of Each Payee Mary Peterson | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 331 Carolina Circle | | | |
| City | State | ZIP Code | |
| Winston Salem | NC | 27104 | |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | District: <u>11</u> |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | <input type="checkbox"/> Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | 706488.53 | | |
| | | Transaction ID: 61009.E52687 | |
| | | Date | 10 / 09 / 2006 |
| | | Amount | 532.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|--|--|--|----------------------|
| Full Name (Last, First, Middle Initial) of Each Payee Mary Peterson | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 331 Carolina Circle | | | |
| City | State | ZIP Code | |
| Winston Salem | NC | 27104 | |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | District: <u>11</u> |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | <input type="checkbox"/> Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | 706488.53 | | |
| | | Transaction ID: 61010.E52697 | |
| | | Date | 10 / 10 / 2006 |
| | | Amount | 825.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

| | | | |
|--|--|--|----------------------|
| Full Name (Last, First, Middle Initial) of Each Payee Kindra Phillips | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address PO Box 4231 | | | |
| City | State | ZIP Code | |
| Asheville | NC | 28805 | |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | District: <u>11</u> |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | <input type="checkbox"/> Presidential | |
| Aggregate General Election Expenditure for this Candidate ▶ | 706488.53 | | |
| | | Transaction ID: 61009.E52678 | |
| | | Date | 10 / 09 / 2006 |
| | | Amount | 187.00 |
| | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |

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| SUBTOTAL of Expenditures This Page (optional) | 1544.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|---|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Donna Robinson | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 865 West Pointe Drive | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28806 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: <u>11</u> | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | 228.00 |
| | | Transaction ID: 61009.E52671 | |

Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

| | | | |
|--|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee John Spears | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 308 West State Street | | | |
| City | State | ZIP Code | Date |
| Black Mountain | NC | 28711 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: <u>11</u> | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | 119.00 |
| | | Transaction ID: 61009.E52677 | |

Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

| | | | |
|---|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Tom Sullivan | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 16 Mt. Vernon Cir. | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28804 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: <u>NC</u> | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: <u>11</u> | |
| Aggregate General Election Expenditure for this Candidate ▶ | | 706488.53 | 290.00 |
| | | Transaction ID: 61009.E52686 | |

Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

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| SUBTOTAL of Expenditures This Page (optional) | 637.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Shelley Townley | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 170 Central Avenue | | | |
| City | State | ZIP Code | Date |
| Weaverville | NC | 28787 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 81.00 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| | | Transaction ID: 61009.E52683 | |

| | | | |
|---|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Donna Turner | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 863 West Pointe Dr. | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28806 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 580.00 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| | | Transaction ID: 61009.E52685 | |

| | | | |
|--|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Each Payee Blakely Whilden | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 8 Busbee Rd | | | |
| City | State | ZIP Code | Date |
| Asheville | NC | 28803 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported | Office Sought: <input checked="" type="checkbox"/> House | State: NC | Amount |
| SHULER, JOSEPH HEATH | <input type="checkbox"/> Senate | District: 11 | |
| | <input type="checkbox"/> Presidential | | 677.00 |
| Aggregate General Election Expenditure for this Candidate | 706488.53 | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| | | Transaction ID: 61009.E52688 | |

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|--|----------------|
| SUBTOTAL of Expenditures This Page (optional) | 1338.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

PAGE 77 / 97
 FOR LINE 25 OF FORM 3X

| | | |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) North Carolina Democratic Party - Federal | | <input type="checkbox"/> Check if 24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | Full Name of Subordinate Committee | |
| If YES, name the designating committee: Democratic Congressional Campaign Cmte. | Mailing Address | |
| | City | State ZIP Code |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee Lucretia Young | | Purpose of Expenditure Payroll 001 | 001 Category/Type |
| Mailing Address 172 Wembley Road | | Date | |
| City Asheville | State NC | ZIP Code 28804 | M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Name of Federal Candidate Supported SHULER, JOSEPH HEATH | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: NC District: 11 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56.00</div> |
| Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">706488.53</div> | | <input checked="" type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) | |
| Transaction ID: 61009.E52679 | | | |

| | |
|--|---|
| SUBTOTAL of Expenditures This Page (optional) | <div style="border: 1px solid black; padding: 2px;">56.00</div> |
| TOTAL This Period (last page this line number only) | <div style="border: 1px solid black; padding: 2px;">545863.53</div> |

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 North Carolina Democratic Party - Federal

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 North Carolina Democratic Party - Federal

| | | |
|--|---|--------------------------------------|
| NAME OF ACCOUNT NC Dem Party- NonF- ed 220 Hillsborou- gh | DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | TOTAL AMOUNT TRANSFERRED 41500.00 |
|--|---|--------------------------------------|

| | | |
|--|--|--|
| BREAKDOWN OF TRANSFER RECEIVED | | |
| i) Total Administrative | | 41500.00 Transaction ID: H361009.C61666 |
| ii) Generic Voter Drive | | Transaction ID: |
| iii) Exempt Activities | | Transaction ID: |
| iv) Direct Fundraising (List Activity or Event Identifier) | | |
| a) _____ | | Transaction ID: |
| b) _____ | | Transaction ID: |
| c) Total Amount Transferred for Direct Fundraising | | |
| v) Direct Candidate Support (List of Activity or Event Identifier) | | |
| a) _____ | | Transaction ID: |
| b) _____ | | Transaction ID: |
| c) Total Amount Transferred For Direct Candidate Support | | |
| vi) Public Communications Referring Only to Party (Made by PAC) | | Transaction ID: |

| | |
|---|----------|
| TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED | |
| TOTAL This Period (Administrative) | 41500.00 |
| TOTAL This Period (Generic Voter Drive) | 0.00 |
| TOTAL This Period (Exempt Activities) | 0.00 |
| TOTAL This Period (Direct Fundraising) | 0.00 |
| TOTAL This Period (Direct Candidate Support) | 0.00 |
| TOTAL This Period (Public Communications Referring Only to Party) | 0.00 |
| TOTAL This Period (Total Amount Transferred) | 41500.00 |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 36001
City Fort Lauderdale **State** FL **Zip Code** 33335-
Purpose of Disbursement:
Credit Card - See Memo Entries
Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
474795.87
Date 10 / 13 / 2006
Transaction ID: H461013.E52707

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 224.65 | | 1273.02 | | 1497.67 |

B. Full Name (Last, First, Middle Initial)
Seligman Group
Mailing Address
c/o Banyan Rock & Talent 3356 Six Forks Road
City Raleigh **State** NC **Zip Code** 27609-
Purpose of Disbursement:
See Memo Entries Below
Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
475930.87
Date 10 / 06 / 2006
Transaction ID: H461007.E52596

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 170.25 | | 964.75 | | 1135.00 |

C. Full Name (Last, First, Middle Initial)
Sallie Leslie
Mailing Address
2209 Cushendon Ct.
City Garner **State** NC **Zip Code** 27529-
Purpose of Disbursement:
Payroll/Pd to Seligman Group
Activity or Event Identifier:
ADMINISTRATION B 4
[MEMO ITEM] Payroll/Pd to Seligman Group

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
200.00
Date 10 / 06 / 2006
Transaction ID: H461007.E52597

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 30.00 | | 170.00 | | 200.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 394.90 | | 2237.77 | | 2632.67 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|---|-------------|---------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Caroline Valand | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 3112 Hines Drive | | | Allocated Activity or Event Year-To-Date 600.00 | | |
| City Raleigh | State NC | Zip Code 27609- | Date MM / DD / YYYY 10 / 06 / 2006 | | |
| Purpose of Disbursement: Payroll/Pd to Seligman Group | | | Transaction ID: H461007.E52599 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Payroll/Pd to Seligman Group | | | Category/Type | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | 90.00 510.00 600.00 | | | |

| | | | | | |
|---|-------------|--------------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Schorr Johnson | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 610 East Whitaker Mill Road | | | Allocated Activity or Event Year-To-Date 100.00 | | |
| City Raleigh | State NC | Zip Code 27608- | Date MM / DD / YYYY 10 / 06 / 2006 | | |
| Purpose of Disbursement: Payroll/Pd to Seligman Group | | | Transaction ID: H461007.E52598 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Payroll/Pd to Seligman Group | | | Category/Type | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | 15.00 85.00 100.00 | | | |

| | | | | | |
|---|-------------|---------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Monica Cloud | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1413 Lions Way | | | Allocated Activity or Event Year-To-Date 235.00 | | |
| City Raleigh | State NC | Zip Code 27604- | Date MM / DD / YYYY 10 / 06 / 2006 | | |
| Purpose of Disbursement: Payroll/Pd to Seligman Group | | | Transaction ID: H461007.E52600 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Payroll/Pd to Seligman Group | | | Category/Type | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | 35.25 199.75 235.00 | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | | |
|---|--|----------------------|--|--|--|
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | 0.00 0.00 0.00 | | | |
|---|--|----------------------|--|--|--|

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | | |
|---|--|-------------------------------|--|--|--|
| FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT | | [Empty] [Empty] [Empty] | | | |
|---|--|-------------------------------|--|--|--|

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
AFLAC

Mailing Address
Attn: Remittance Processing 1902 Wynnton Road

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| Columbus | GA | 31999-0001 |

Purpose of Disbursement:
1000.02/Supp Ins. Admin Fee

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
475978.87

Date / /

Transaction ID: H461013.E52713

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.20 | | 40.80 | | 48.00 |

B. Full Name (Last, First, Middle Initial)
Dixon Hughes PLLC

Mailing Address
2501 Blue Ridge Rd., Suite 200

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Raleigh | NC | 27607- |

Purpose of Disbursement:
1000.03/Accounting Services

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
476528.87

Date / /

Transaction ID: H461013.E52709

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 82.50 | | 467.50 | | 550.00 |

C. Full Name (Last, First, Middle Initial)
Derwin Dubose

Mailing Address
5110 Old Chapel Hill Rd.

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Durham | NC | 27707- |

Purpose of Disbursement:
1000.04/Travel/Mileage

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
476935.41

Date / /

Transaction ID: H461007.E52602

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 22.05 | | 124.95 | | 147.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 111.75 | | 633.25 | | 745.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | |
|--|-------------|--------------------|--|--|
| A. Full Name (Last, First, Middle Initial) Derwin Dubose | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 5110 Old Chapel Hill Rd. | | | Allocated Activity or Event Year-To-Date 476788.41 | |
| City Durham | State NC | Zip Code 27707- | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: H461007.E52603 | |
| Purpose of Disbursement: See Memo Entries - Reimbursement | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.37 | | 115.41 | | 135.78 |

| | | | | |
|--|-------------|--------------------|--|--|
| B. Full Name (Last, First, Middle Initial) Raleigh-Durham Airport Parking | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address Airport Blvd. | | | Allocated Activity or Event Year-To-Date 20.00 | |
| City Raleigh | State NC | Zip Code 27623- | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: H461021.E52870 | |
| Purpose of Disbursement: Parking/Pd to D Dubose | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Parking/Pd to D Dubose | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 3.00 | | 17.00 | | 20.00 |

| | | | | |
|--|-------------|--------------------|--|--|
| C. Full Name (Last, First, Middle Initial) Quiznos | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 9235 Wayne Road | | | Allocated Activity or Event Year-To-Date 8.78 | |
| City Romulus | State MI | Zip Code 48174- | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: H461021.E52866 | |
| Purpose of Disbursement: Meals/Pd to D Dubose | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Meals/Pd to D Dubose | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.32 | | 7.46 | | 8.78 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.37 | | 115.41 | | 135.78 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|---|-------|----------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Marriott Renaissance Center | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Renaissance Center | | | Allocated Activity or Event Year-To-Date 12.00 | | |
| City | State | Zip Code | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Detroit | MI | 48243- | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Purpose of Disbursement: Meals/Pd to D Dubose | | | Transaction ID: H461021.E52867 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Meals/Pd to D Dubose | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.80 | | 10.20 | | 12.00 |

| | | | | | |
|---|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Metro Airport Taxi | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 9235 Wayne Road | | | Allocated Activity or Event Year-To-Date 45.00 | | |
| City | State | Zip Code | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Romulus | MI | 48174- | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Purpose of Disbursement: Taxi Fare/Pd to D Dubose | | | Transaction ID: H461021.E52868 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Taxi Fare/Pd to D Dubose | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.75 | | 38.25 | | 45.00 |

| | | | | | |
|---|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Motor City Cab | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1131 W. Warren Avenue Suite 305 | | | Allocated Activity or Event Year-To-Date 50.00 | | |
| City | State | Zip Code | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Detroit | MI | 48201- | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Purpose of Disbursement: Taxi Fare/Pd to D Dubose | | | Transaction ID: H461021.E52869 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Taxi Fare/Pd to D Dubose | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.50 | | 42.50 | | 50.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.00 | | 0.00 | | 0.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|---|-------|----------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Monica Cloud | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1413 Lions Way | | | Allocated Activity or Event Year-To-Date 476538.67 | | |
| City | State | Zip Code | Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2006"/> Transaction ID: H461007.E52607 | | |
| Raleigh | NC | 27604- | | | |
| Purpose of Disbursement: 1000.04/Travel/Mileage | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.47 | | 8.33 | | 9.80 |

| | | | | | |
|---|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Monica Cloud | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1413 Lions Way | | | Allocated Activity or Event Year-To-Date 476652.63 | | |
| City | State | Zip Code | Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2006"/> Transaction ID: H461007.E52608 | | |
| Raleigh | NC | 27604- | | | |
| Purpose of Disbursement: See Memo Entries - Reimbursement | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.09 | | 96.87 | | 113.96 |

| | | | | | |
|---|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Raleigh-Durham Airport Parking | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Airport Blvd. | | | Allocated Activity or Event Year-To-Date 1.00 | | |
| City | State | Zip Code | Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2006"/> Transaction ID: H461021.E52875 | | |
| Raleigh | NC | 27623- | | | |
| Purpose of Disbursement: Parking/Pd to M Cloud | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] Parking/Pd to M Cloud | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.15 | | 0.85 | | 1.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.56 | | 105.20 | | 123.76 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Metro Airport Taxi

Mailing Address
9235 Wayne Road

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Romulus | MI | 48174- |

Purpose of Disbursement:
Taxi Fare/Pd to M Cloud

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48.80

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 6 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461021.E52871

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Taxi Fare/Pd to M Cloud

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.32 | | 41.48 | | 48.80 |

B. Full Name (Last, First, Middle Initial)
Subway Restaurant

Mailing Address
A203 Renaissance Food Court

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Detroit | MI | 48243- |

Purpose of Disbursement:
Meals/Pd to M Cloud

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11.62

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 6 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461021.E52872

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Meals/Pd to M Cloud

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.74 | | 9.88 | | 11.62 |

C. Full Name (Last, First, Middle Initial)
Coneytown Gyroland

Mailing Address
Renaissance Food Court

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Detroit | MI | 48243- |

Purpose of Disbursement:
Meals/Pd to M Cloud

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1.54

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 6 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461021.E52873

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Meals/Pd to M Cloud

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.23 | | 1.31 | | 1.54 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.00 | | 0.00 | | 0.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Checker Cab Co.

Mailing Address
26500 Van Born Road

City State Zip Code
Dearborn Heights MI 48125-

Purpose of Disbursement:
Taxi Fare/Pd to M Cloud

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.00

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Taxi Fare/Pd to M Cloud

Date 10 / 06 / 2006

Transaction ID: H461021.E52874

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.50 | | 42.50 | | 50.00 |

B. Full Name (Last, First, Middle Initial)
Wake Medical Center Parking

Mailing Address
3000 New Bern Avenue

City State Zip Code
Raleigh NC 27610-

Purpose of Disbursement:
Parking/Pd to M Cloud

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1.00

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Parking/Pd to M Cloud

Date 10 / 06 / 2006

Transaction ID: H461021.E52876

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.15 | | 0.85 | | 1.00 |

C. Full Name (Last, First, Middle Initial)
US Airways - Disb

Mailing Address
111 West Rio Salado Parkway

City State Zip Code
Tempe AZ 85281-

Purpose of Disbursement:
Travel/Pd to Am Ex

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

209.20

Activity or Event Identifier:
ADMINISTRATION B 4

[MEMO ITEM] Travel/Pd to Am Ex

Date 10 / 13 / 2006

Transaction ID: H461016.E52758

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 31.38 | | 177.82 | | 209.20 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.00 | | 0.00 | | 0.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
TSM South, Inc.
Mailing Address
PO Box 2137
City State Zip Code
Cary NC 27512-
Purpose of Disbursement:
1000.05/Office Equipment
Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
477794.26
Date 10 / 13 / 2006
Transaction ID: H461013.E52706

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 19.69 | | 111.56 | | 131.25 |

B. Full Name (Last, First, Middle Initial)
IKON Financial Services
Mailing Address
IOS Capital PO Box 740540
City State Zip Code
Atlanta GA 30374-0540
Purpose of Disbursement:
1000.05/Office Equipment
Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
477663.01
Date 10 / 13 / 2006
Transaction ID: H461013.E52710

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 109.14 | | 618.46 | | 727.60 |

C. Full Name (Last, First, Middle Initial)
United States Postal Service
Mailing Address
Capitol Station 311 New Bern Avenue
City State Zip Code
Raleigh NC 27601-
Purpose of Disbursement:
1000.06/BRE Postage
Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
477824.26
Date 10 / 06 / 2006
Transaction ID: H461007.E52601

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.50 | | 25.50 | | 30.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 133.33 | | 755.52 | | 888.85 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
UPS

Mailing Address
PO Box 7247-0244

| | | |
|--------------|-------|------------|
| City | State | Zip Code |
| Philadelphia | PA | 19170-0001 |

Purpose of Disbursement:
1000.06/Shipping

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

477966.95

Activity or Event Identifier:
ADMINISTRATION B 4

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 6 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461007.E52616

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 21.40 | | 121.29 | | 142.69 |

B. Full Name (Last, First, Middle Initial)
UPS

Mailing Address
PO Box 7247-0244

| | | |
|--------------|-------|------------|
| City | State | Zip Code |
| Philadelphia | PA | 19170-0001 |

Purpose of Disbursement:
1000.06/Shipping

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

478010.53

Activity or Event Identifier:
ADMINISTRATION B 4

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 3 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461013.E52714

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.54 | | 37.04 | | 43.58 |

C. Full Name (Last, First, Middle Initial)
Neopost

Mailing Address
PO Box 73727

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Chicago | IL | 60673-7727 |

Purpose of Disbursement:
1000.06/Postage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

478510.53

Activity or Event Identifier:
ADMINISTRATION B 4

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 8 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461020.E52803

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 75.00 | | 425.00 | | 500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 102.94 | | 583.33 | | 686.27 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|--|-------|----------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Solid Space | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 111 N. Chestnut Street Suite 200 | | | Allocated Activity or Event Year-To-Date 478690.38 | | |
| City | State | Zip Code | Date M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 Transaction ID: H461012.E52702 | | |
| Winston Salem | NC | 27101- | | | |
| Purpose of Disbursement: 1000.08/Internet Hosting | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 26.98 | | 152.87 | | 179.85 |

| | | | | | |
|--|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) BTI | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 70835 | | | Allocated Activity or Event Year-To-Date 480074.53 | | |
| City | State | Zip Code | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: H461013.E52711 | | |
| Charlotte | NC | 28272- | | | |
| Purpose of Disbursement: 1000.08/Telephone | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 207.62 | | 1176.53 | | 1384.15 |

| | | | | | |
|--|-------|------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Time Warner Cable | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 2505 Atlantic Avenue | | | Allocated Activity or Event Year-To-Date 480186.68 | | |
| City | State | Zip Code | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: H461007.E52615 | | |
| Raleigh | NC | 27604-1411 | | | |
| Purpose of Disbursement: 1000.09/Cable TV | | | Category/ Type | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 16.82 | | 95.33 | | 112.15 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 251.42 | | 1424.73 | | 1676.15 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|--|-------------------|--|---|--|--|
| A. Full Name (Last, First, Middle Initial) Progress Energy | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 2041 | | | Allocated Activity or Event Year-To-Date 480839.97 | | |
| City State Zip Code Raleigh NC 27602- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: 1000.09/Utilities | | | Transaction ID: H461013.E52715 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 97.99 | | 555.30 | | 653.29 |

| | | | | | |
|--|-------------------|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) City of Raleigh | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 96084 | | | Allocated Activity or Event Year-To-Date 480919.97 | | |
| City State Zip Code Charlotte NC 28296-0084 | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 | | |
| Purpose of Disbursement: 1000.13/Solid Waste Pick Up | | | Transaction ID: H461003.E52585 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.00 | | 68.00 | | 80.00 |

| | | | | | |
|---|-------------------|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) Millennium Cleaning Service | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1416 Turner Farms Rd. | | | Allocated Activity or Event Year-To-Date 482001.24 | | |
| City State Zip Code Garner NC 27529- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | | |
| Purpose of Disbursement: 1000.10/Cleaning | | | Transaction ID: H461007.E52618 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 63.04 | | 357.23 | | 420.27 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 173.03 | | 980.53 | | 1153.56 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | |
|---|-------------|--------------------|---|--|
| A. Full Name (Last, First, Middle Initial) McLaurin Parking | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address PO Box 781 | | | Allocated Activity or Event Year-To-Date 481580.97 | |
| City Raleigh | State NC | Zip Code 27602- | Date M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: H461007.E52620 | |
| Purpose of Disbursement: 1000.10/Parking | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 99.15 | | 561.85 | | 661.00 |

| | | | | |
|--|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Movin On Movers | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 2425 Reliance Ave. | | | Allocated Activity or Event Year-To-Date 482101.24 | |
| City Apex | State NC | Zip Code 27502- | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: H461013.E52708 | |
| Purpose of Disbursement: 1000.10/Storage | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 15.00 | | 85.00 | | 100.00 |

| | | | | |
|--|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Newcomb & Co. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address PO Box 58010 | | | Allocated Activity or Event Year-To-Date 482631.24 | |
| City Raleigh | State NC | Zip Code 27658- | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: H461013.E52712 | |
| Purpose of Disbursement: 1000.10/HVAC Maintenance | | | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 79.50 | | 450.50 | | 530.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 193.65 | | 1097.35 | | 1291.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|---|-------|----------|---|--|--|
| A. Full Name (Last, First, Middle Initial) North State Bank | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6200 Falls of Neuse Road | | | Allocated Activity or Event Year-To-Date 482648.70 | | |
| City | State | Zip Code | Category/ Type | | |
| Raleigh | NC | 27609- | | | |
| Purpose of Disbursement: 1000.13/Bank Fee | | | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | Transaction ID: H461009.E52664 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.75 | | 4.25 | | 5.00 |

| | | | | | |
|---|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) North State Bank | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6200 Falls of Neuse Road | | | Allocated Activity or Event Year-To-Date 482643.70 | | |
| City | State | Zip Code | Category/ Type | | |
| Raleigh | NC | 27609- | | | |
| Purpose of Disbursement: 1000.13/Bank Fee | | | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | Transaction ID: H461009.E52669 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.87 | | 10.59 | | 12.46 |

| | | | | | |
|---|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) First American Payment Systems | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 201 Main Street # 1000 | | | Allocated Activity or Event Year-To-Date 482693.70 | | |
| City | State | Zip Code | Category/ Type | | |
| Fort Worth | TX | 76102- | | | |
| Purpose of Disbursement: 1000.13/Credit Card Processing Fee | | | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | Transaction ID: H461010.E52698 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.75 | | 38.25 | | 45.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 9.37 | | 53.09 | | 62.46 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|--|-------------------|--|---|--|--|
| A. Full Name (Last, First, Middle Initial) Fresh Market | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Cameron Village Shopping Center | | | Allocated Activity or Event Year-To-Date 12.23 | | |
| City State Zip Code Raleigh NC 27605- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: Catering/Pd to Am Ex | | | Transaction ID: H461016.E52761 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM]Catering/Pd to Am Ex | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.83 | | 10.40 | | 12.23 |

| | | | | | |
|--|-------------------|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) American Express | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 36001 | | | Allocated Activity or Event Year-To-Date 17.03 | | |
| City State Zip Code Fort Lauderdale FL 33335- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: Bank Fee/Paid to Am Ex | | | Transaction ID: H461016.E52762 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM]Bank Fee/Paid to Am Ex | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2.55 | | 14.48 | | 17.03 |

| | | | | | |
|--|-------------------|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) Bear Rock Cafe | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 404 E. Six Forks Road | | | Allocated Activity or Event Year-To-Date 52.61 | | |
| City State Zip Code Raleigh NC 27606- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: 1000.16/Food/Catering | | | Transaction ID: H461016.E52756 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM]1000.16/Food/Catering | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.89 | | 44.72 | | 52.61 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 0.00 | | 0.00 | | 0.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

| | | | | | |
|--|-------------------|--|---|--|--|
| A. Full Name (Last, First, Middle Initial) Fresh Market | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Cameron Village Shopping Center | | | Allocated Activity or Event Year-To-Date 54.12 | | |
| City State Zip Code Raleigh NC 27605- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: Catering/Pd to Am Ex | | | Transaction ID: H461016.E52760 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM]Catering/Pd to Am Ex | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 8.12 | | 46.00 | | 54.12 |

| | | | | | |
|--|-------------------|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) Topica | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 685 Market St., Suite 300 | | | Allocated Activity or Event Year-To-Date 52.50 | | |
| City State Zip Code San Francisco CA 94105- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | | |
| Purpose of Disbursement: Computer Software/Pd to AmEx | | | Transaction ID: H461016.E52757 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM]Computer Software/Pd to AmEx | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.88 | | 44.62 | | 52.50 |

| | | | | | |
|--|-------------------|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) North Carolina Department of Agricultu | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1025 Blue Ridge Blvd | | | Allocated Activity or Event Year-To-Date 483193.70 | | |
| City State Zip Code Raleigh NC 27607- | Category/ Type | | Date M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 | | |
| Purpose of Disbursement: 1000.50/Booth Rental | | | Transaction ID: H461012.E52701 | | |
| Activity or Event Identifier: ADMINISTRATION B 4 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 75.00 | | 425.00 | | 500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 75.00 | | 425.00 | | 500.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Democratic Party - Federal

A. Full Name (Last, First, Middle Initial)
Vistaprint.com

Mailing Address
100 Hayden Ave.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lexington | MA | 02421- |

Purpose of Disbursement:
Generic Advertising/Pd to Am Ex

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1099.98

Activity or Event Identifier:
GENERIC VOTER DRIVE
[MEMO ITEM] Generic Advertising/Pd to Am Ex

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 3 | / | 2 | 0 | 0 | 6 |

Transaction ID: H461016.E52759

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 165.00 | | 934.98 | | 1099.98 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 0.00 | | 0.00 | | 0.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| 1484.32 | 8411.18 | 9895.50 |

Form/Schedule: **F3XA**

Transaction ID: **C00165688**

ASDC Partnership Program is a joint fundraising programs in which the North Carolina Democratic Party participates. Transfers are made to the NCDP on an as-needed basis. Please note that state party committees have been reporting Memo Entries on Schedule A for contributions received by the joint fundraising program during the reporting period in which the contribution was received irrespective of whether transfers have been made. Memo Entries on Schedule A from these programs reflect the gross amounts raised while the transfers to the NCDP reflect the net amount distributed to date. Accordingly, there will always be a difference between the transfer and the Memo Schedule A totals. By prior agreement between the NCDP's counsel and the FEC, Memo Schedule As for these programs are reported on a quarterly basis. The NCDP has used its best efforts as defined by the FEC to disclose the full identity of all individuals who contribute in excess of \$200 in a calendar year. In addition to requesting the information on the original solicitation, every 30 days the NCDP sends to all donors whose information is not complete a letter requesting the required information and includes a self-addressed stamped reply postcard. No disbursement disclosed on Schedule B Supporting Line 21 on this report referred to a clearly identified federal candidate or was made on behalf of a clearly identified federal candidate. Payment(s) disclosed for Generic Advertising were for non-public communication, generic activity. The purpose of the Co-Ordinated Expenditure disclosed on Schedule F to Natural Expressions was incorrectly described as Direct Mail on the 24-hour Report. It is correctly described here as being for Door Hangers. The amendment is filed to disclose a \$35,000 wire transfer from the Democratic Congressional Campaign Committee that we were not aware was made.