

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THE TRUTH SQUAD

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="1,000.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1,000.19"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0"/>	<input type="text" value="0"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1,000.19"/>	<input type="text" value="1,000.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3,100"/>	<input type="text" value="3,100"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9,691.9"/>	<input type="text" value="9,691.9"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on, Schedule C and/or Schedule D)	<input type="text" value="0"/>	

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

**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 OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

THE TRUTH SQUAD

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement
First Bank		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y
Mailing Address 200 Seboard Street		<input type="text"/> 0 4 / <input type="text"/> 3 0 / <input type="text"/> 2 0 1 5
City Vass	State NC	Zip Code 28394
Purpose of Disbursement Bank Charges	<input type="text"/> 0 0 1	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text"/> 5 0 0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B.		Date of Disbursement
First Bank		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y
Mailing Address 200 Seboard Street		<input type="text"/> 0 5 / <input type="text"/> 2 9 / <input type="text"/> 2 0 1 5
City Vass	State NC	Zip Code 28394
Purpose of Disbursement Bank Fees	<input type="text"/> 0 0 1	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text"/> 1 3 0 0
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:		

C.		Date of Disbursement
First Bank		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y
Mailing Address 200 Seboard Street		<input type="text"/> 0 6 / <input type="text"/> 3 0 / <input type="text"/> 2 0 1 5
City Vass	State NC	Zip Code 28394
Purpose of Disbursement Bank Fees	<input type="text"/> 0 0 1	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text"/> 1 3 0 0
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).....▶

3 1 0 0

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

3 1 0 0

NON-PROFIT CORPORATION



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INC.

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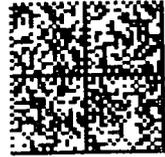
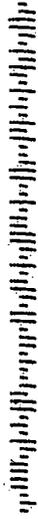
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)
7/3/15

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER

7/3/15
DATE PREPARED

20150703 10:00:00 AM