

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		8762.27
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	10186.77									
(c) Total Receipts (from Line 19)	10653.34	12540.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20840.11	21302.61								
7. Total Disbursements (from Line 31)	7462.58	7925.08								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13377.53	13377.53								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	600.00	600.00
(ii) Unitemized	8475.34	9638.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9075.34	10238.34
(b) Political Party Committees	1478.00	2002.00
(c) Other Political Committees (such as PACs)	100.00	300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10653.34	12540.34
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10653.34	12540.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10653.34	12540.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	7462.58	7925.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7462.58	7925.08
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).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) 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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7462.58	7925.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7462.58	7925.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 19

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)	10653.34	12540.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10653.34	12540.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7462.58	7925.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7462.58	7925.08

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 19
(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 <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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)
George Cleveland

Mailing Address 224 Campbell Place

City State Zip Code
Jacksonville NC 28546

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

Name of Employer State of NC Occupation Rep. in NC House

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.7715

Amount of Each Receipt this Period
30.00

pass the hat donation

B.

Full Name (Last, First, Middle Initial)
George Cleveland

Mailing Address 224 Campbell Place

City State Zip Code
Jacksonville NC 28546

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

Name of Employer State of NC Occupation Rep. in NC House

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.7993

Amount of Each Receipt this Period
10.00

conv. 50-50 ticket donation

C.

Full Name (Last, First, Middle Initial)
Virginia Cooper

Mailing Address 2617 Church St.

City State Zip Code
Winterville NC 28590

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 ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.7996

Amount of Each Receipt this Period
5.00

conv. 50-50 ticket purchase

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Kim Hendrix	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1830 Blue Banks Farm Rd	Transaction ID: SA11AI.7887
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 63.00
	FEC ID number of contributing federal political committee. C	purch silent auction arti- cle(s) at conv.
Name of Employer Productions by Kim	Occupation event planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.00	

B.	Full Name (Last, First, Middle Initial) Kim Hendrix	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1830 Blue Banks Farm Rd	Transaction ID: SA11AI.7938
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	Purse raffle ticket purch- ase
Name of Employer Productions by Kim	Occupation event planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.00	

C.	Full Name (Last, First, Middle Initial) Kim Hendrix	Date of Receipt MM / DD / YYYY 05 / 03 / 2010
	Mailing Address 1830 Blue Banks Farm Rd	Transaction ID: SA11AI.8012
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	conv. 50-50 ticket purch- ase
Name of Employer Productions by Kim	Occupation event planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.00	

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 19
	(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
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Bob Pruett		Date of Receipt
	Mailing Address PO Box 695		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Beaufort	NC	28516
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pruett Rentals		Occupation self-employed	Transaction ID: SA11AI.8063 Amount of Each Receipt this Period <input type="text" value="425.00"/> donation for conv. Carter- et County theme basket
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

B.	Full Name (Last, First, Middle Initial) Ann Sullivan		Date of Receipt
	Mailing Address 103 Wildwood Dr.		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Goldsboro	NC	27530
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer retired		Occupation retired	Transaction ID: SA11AI.8091 Amount of Each Receipt this Period <input type="text" value="60.00"/> donation for shirt & cook- books
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="248.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="485.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="600.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19
(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
Beaufort County GOP

Mailing Address 1243 Little Creek Rd. Ext.

City Belhaven State NC Zip Code 27810

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt: 04 / 18 / 2010
Transaction ID: SA11B.8098
Amount of Each Receipt this Period: 65.00
In-kind - donation of the-me basket items for auction

B. Full Name (Last, First, Middle Initial)
Camden County GOP

Mailing Address 102 Smith Dr.

City Camden State NC Zip Code 27921

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt: 04 / 18 / 2010
Transaction ID: SA11B.8100
Amount of Each Receipt this Period: 50.00
-In-kind - donation of theme basket items for auction

C. Full Name (Last, First, Middle Initial)
Camden County GOP

Mailing Address 102 Smith Dr.

City Camden State NC Zip Code 27921

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 62.00

Date of Receipt: 04 / 18 / 2010
Transaction ID: SA11B.8130
Amount of Each Receipt this Period: 12.00
In-kind - donation of silent auction article(s)

SUBTOTAL of Receipts This Page (optional) ► 127.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
Carteret County GOP
Mailing Address PO Box 1775
City Newport State NC Zip Code 28570
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 179.00
Date of Receipt 04 / 01 / 2010
Transaction ID: SA11B.7706
Amount of Each Receipt this Period 79.00
County Conv. fee

B. Full Name (Last, First, Middle Initial)
Carteret County GOP
Mailing Address PO Box 1775
City Newport State NC Zip Code 28570
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 604.00
Date of Receipt 04 / 18 / 2010
Transaction ID: SA11B.8102
Amount of Each Receipt this Period 425.00
In-kind - donation of the-me basket items for auction

C. Full Name (Last, First, Middle Initial)
Craven County GOP
Mailing Address PO Box 13466
City New Bern State NC Zip Code 28561
FEC ID number of contributing federal political committee. **C** C00000000
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 135.00
Date of Receipt 04 / 18 / 2010
Transaction ID: SA11B.8104
Amount of Each Receipt this Period 85.00
In-kind - donation of the-me basket items for auction

SUBTOTAL of Receipts This Page (optional) ► 589.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 19
(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)
Craven County GOP

Mailing Address PO Box 13466

City State Zip Code
New Bern NC 28561

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
185.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2010

Transaction ID: SA11B.7859

Amount of Each Receipt this Period
50.00

conv. county delegate fees

B.

Full Name (Last, First, Middle Initial)
Craven County GOP Women's Club

Mailing Address 452 Neuchatel Rd.

City State Zip Code
New Bern NC 28562

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
87.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2010

Transaction ID: SA11B.8132

Amount of Each Receipt this Period
37.00

In-kind - donation of silent auction article(s)

C.

Full Name (Last, First, Middle Initial)
Currituck County GOP

Mailing Address 1097 Waterlily Rd.

City State Zip Code
Coinjock NC 27923

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
63.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2010

Transaction ID: SA11B.7806

Amount of Each Receipt this Period
13.00

convention county fee

SUBTOTAL of Receipts This Page (optional) ▶ **100.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 19
(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)
Currituck County GOP

Mailing Address 1097 Waterlily Rd.

City State Zip Code
Coinjock NC 27923

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
108.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 0

Transaction ID: SA11B.8106

Amount of Each Receipt this Period
45.00

In-kind - donation of the-me basket items for auction

B.

Full Name (Last, First, Middle Initial)
Dare County GOP

Mailing Address PO Box 3383

City State Zip Code
Kill Devil Hills NC 27948

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
154.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 0

Transaction ID: SA11B.8108

Amount of Each Receipt this Period
130.00

In-kind - donation of the-me basket items for auction

C.

Full Name (Last, First, Middle Initial)
Duplin County GOP

Mailing Address 361 Leste Houston Rd.

City State Zip Code
Pink Hill NC 28572

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Transaction ID: SA11B.7707

Amount of Each Receipt this Period
13.00

county conv. fee

SUBTOTAL of Receipts This Page (optional) ► **188.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
Nash County GOP

Mailing Address PO Box 8122

City State Zip Code
Rocky Mount NC 27804

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
51.00

Date of Receipt

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

Transaction ID: SA11B.7860

Amount of Each Receipt this Period
51.00

conv. county delegate fees

B. Full Name (Last, First, Middle Initial)
Onslow County Republican Party

Mailing Address PO Box 716

City State Zip Code
Jacksonville NC 28541

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
145.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	0

Transaction ID: SA11B.8110

Amount of Each Receipt this Period
45.00

In-kind - donation of the-me basket items for auction

C. Full Name (Last, First, Middle Initial)
Onslow County Republican Party

Mailing Address PO Box 716

City State Zip Code
Jacksonville NC 28541

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
197.00

Date of Receipt

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

Transaction ID: SA11B.7861

Amount of Each Receipt this Period
52.00

conv. county delegate fees

SUBTOTAL of Receipts This Page (optional) ► **148.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 19

(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Onslow County Republican Party		Date of Receipt
	Mailing Address PO Box 716		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Jacksonville	NC	28541
	FEC ID number of contributing federal political committee.		<input type="text" value="C00000000"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="247.00"/>	conv program ad purchase

B.	Full Name (Last, First, Middle Initial) Pamlico County GOP		Date of Receipt
	Mailing Address PO Box 122		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Merritt	NC	28556
	FEC ID number of contributing federal political committee.		<input type="text" value="C00000000"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
		<input type="text" value="75.00"/>	In-kind - donation of the-me basket items for auction

C.	Full Name (Last, First, Middle Initial) Pitt County GOP		Date of Receipt
	Mailing Address PO Box 8498		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Greenville	NC	27835
	FEC ID number of contributing federal political committee.		<input type="text" value="C00000000"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="90.00"/>
		<input type="text" value="90.00"/>	In-kind - donation of the-me basket items for auction

SUBTOTAL of Receipts This Page (optional) ▶

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

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

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

FOR LINE NUMBER: PAGE 15 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
Pitt County GOP

Mailing Address PO Box 8498

City Greenville State NC Zip Code 27835

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 124.00

Date of Receipt: 04 / 22 / 2010
Transaction ID: SA11B.7862
 Amount of Each Receipt this Period: 34.00
 conv. county delegate fees

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

Mailing Address PO Box 10821

City Goldsboro State NC Zip Code 27532

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 135.00

Date of Receipt: 04 / 18 / 2010
Transaction ID: SA11B.8116
 Amount of Each Receipt this Period: 65.00
 In-kind - donation of the-me basket items for auction

C. Full Name (Last, First, Middle Initial)
Wilson County GOP

Mailing Address 313 Ward Blvd. NW

City Wilson State NC Zip Code 27896

FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12.00

Date of Receipt: 04 / 22 / 2010
Transaction ID: SA11B.7863
 Amount of Each Receipt this Period: 12.00
 conv. county delegate fees

SUBTOTAL of Receipts This Page (optional) ► 111.00

TOTAL This Period (last page this line number only) ► 1478.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 19	
	(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

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Citizens to Elect Jean Preston		Date of Receipt	
	Mailing Address PO Box 5107		M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11C.7894
	Emerald Isle	NC	28594	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
Name of Employer		Occupation		conv program ad purchase
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		100.00		

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	100.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Carnival Cruise Lines	Transaction ID: SB21B.8060 Date of Disbursement
	Mailing Address PO Box 526170	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Miami State FL Zip Code 33152	Amount of Each Disbursement this Period
	Purpose of Disbursement Payment for cruise raffle prize	<input type="text" value="767.14"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Carteret County GOP	Transaction ID: SB21B.8103 Date of Disbursement
	Mailing Address PO Box 1775	<input type="text" value="04"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Newport State NC Zip Code 28570	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - donation of theme basket items for auction	<input type="text" value="425.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Express Printing	Transaction ID: SB21B.8068 Date of Disbursement
	Mailing Address 117 N. Marine Blvd	<input type="text" value="05"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Jacksonville State NC Zip Code 28540	Amount of Each Disbursement this Period
	Purpose of Disbursement convention program printing costs	<input type="text" value="323.86"/>
	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)	<input type="text" value="1516.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A.	Full Name (Last, First, Middle Initial) Graphixx Screen Printing	Transaction ID: SB21B.8072 Date of Disbursement
	Mailing Address PO Box 1318	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Goldsboro State NC Zip Code 27533	Amount of Each Disbursement this Period
	Purpose of Disbursement purchase of shirts partial payment	<input type="text" value="475.00"/>
	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:	

B.	Full Name (Last, First, Middle Initial) Graphixx Screen Printing	Transaction ID: SB21B.8073 Date of Disbursement
	Mailing Address PO Box 1318	<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="08"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Goldsboro State NC Zip Code 27533	Amount of Each Disbursement this Period
	Purpose of Disbursement purchase of shirts balance	<input type="text" value="437.00"/>
	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:	

C.	Full Name (Last, First, Middle Initial) Kathryn's Catering	Transaction ID: SB21B.7828 Date of Disbursement
	Mailing Address 9106 A Coast Guard Rd.	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="17"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Emerald Isle State NC Zip Code 28594	Amount of Each Disbursement this Period
	Purpose of Disbursement Convention lunch & refreshmtns catering	<input type="text" value="1350.00"/>
	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)	<input type="text" value="2262.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 19 / 19

<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)
THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Lola Williams <hr/> Mailing Address 3413 Pinetree La. <hr/> City Greenville State NC Zip Code 27858 <hr/> Purpose of Disbursement raffle award Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7829 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 213.00
B. Full Name (Last, First, Middle Initial) Michael Zak <hr/> Mailing Address PO Box 33985 <hr/> City Washington State DC Zip Code 20033 <hr/> Purpose of Disbursement convention speaker expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7830 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1194.24

SUBTOTAL of Disbursements This Page (optional) ►

1407.24

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

5185.24