PAGE 1 / 10

## **FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

	For Other Than An Au	thorized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
North Carolina Medica	al Society Federal Po	olitical Education and	Action Committee
ADDRESS (number and street)	PO Box 25834		
▼ Check if different	222 N. Person Street		
than previously reported. (ACC)	Raleigh		NC 27611 - L L L L L L L L L L L L L L L L L L
2. FEC IDENTIFICATION N	<b>UMBER ▼</b> C	ITY 🛦	STATE ▲ ZIP CODE ▲
C C00003152		IS THIS REPORT (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	ar 20 (M3) May 20	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (0		or 20 (M4) Jul 20 (	M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (0	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (C January 31 Year-End Report (N		ion on	in the State of
July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	ion on	in the State of
5. Covering Period 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the		of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Hayes, Rebecca, , ,		
Signature of Treasurer  Haye	es, Rebecca, , ,	[Electronically Filed]	Date 01 / 31 / 2023
NOTE: Submission of false, erron	eous, or incomplete informati	on may subject the person sigr	ning this Report to the penalties of 52 U.S.C. § 3010
Office			FEC FORM 3X
Use Only			Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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Write or Type Committee Name

#### North Carolina Medical Society Federal Political Education and Action Committee

11 29 2022 12 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 22585.54 January 1. 2022 (b) Cash on Hand at 31546.14 Beginning of Reporting Period..... 790.04 9750.64 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 32336.18 32336.18 6(a) and 6(c) for Column B)..... 0.00 0.00 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 32336.18 32336.18 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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. 05/2016)

Write or Type Committee Name

#### North Carolina Medical Society Federal Political Education and Action Committee

2022 31 2022 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 720.00 3085.00 (i) Itemized (use Schedule A)..... 1665.00 70.00 (ii) Unitemized ..... (iii) TOTAL (add 4750.00 790.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 5000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 9750.00 790.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.64 (Dividends, Interest, etc.)..... 0.04 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 9750.64 12, 13, 14, 15, 16, 17, and 18(c))....... 790.04 20. Total Federal Receipts 790.04 9750.64 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

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II. Disbursements	COLUMN A  Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)	/	Suisinda Tour to Date
(i) Federal Share	0.00	0.00
(ii) Non Fodoval Obova	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	. 0.00	0.00
(c) Total Operating Expenditures	1 1 1 1 1 1 1 1 1 1	
(add 21(a)(i), (a)(ii), and (b))	▶ 0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	
and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan riepayments made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	7 7 7	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	4 1 4 1 1 1 1 1 1 1 1	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
(add Lines 20(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30	101(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	4 4	
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
	0.00	0.00
Total Disbursements (add Lines 21(c), 22	2,	
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	0.00	0.00
Total Federal Disbursements	7 7	
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	0.00	0.00
	4 4	0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

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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)	790.00	9750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	790.00	9750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the

		LINE			PAGE	=	6	OF		10		
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Detailed Summary Page 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 Medical Society Federal Political Education and Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Baggett, Hurshell 'Chip', , , Date of Receipt Mailing Address PO Box 27167 2022 City Zip Code State Transaction ID: SA11AI.17085 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society Senior Vice President General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 2300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baggett, Hurshell 'Chip', , Date of Receipt Mailing Address PO Box 27167 2022 City State Zip Code Transaction ID: SA11AI.17098 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society Senior Vice President General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Highsmith, Pamela, , , Date of Receipt Mailing Address PO Box 27167 12 2022 City Zip Code State Transaction ID: SA11AI.17087 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **General Contribution** North Carolina Medical Society VP, Advancement & Donor Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 425.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the

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Detailed Summary Page 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 Medical Society Federal Political Education and Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Highsmith, Pamela, , , Date of Receipt Mailing Address PO Box 27167 2022 City Zip Code State Transaction ID: SA11AI.17100 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP, Advancement & Donor Relations North Carolina Medical Society General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Newton, Ashley, , , Date of Receipt Mailing Address 2425 North Cente Street #308 2022 City State Zip Code Transaction ID: SA11AI.17091 NC Hickory 28601 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society **General Contribution** VP, Member Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Newton, Ashley, , , Date of Receipt Mailing Address 2425 North Cente Street #308 22 2022 City State Zip Code Transaction ID: SA11AI.17103 NC Hickory 28601 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **General Contribution** North Carolina Medical Society VP, Member Services Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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Detailed Summary Page 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 Medical Society Federal Political Education and Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rodriguez, Ashley, H.,, Date of Receipt Mailing Address 62 Sleepy Creek Drive 2022 City Zip Code State Transaction ID: SA11AI.17093 NC Clayton 27520 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Legal Officer North Carolina Medical Society General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rodriguez, Ashley, H., , Date of Receipt Mailing Address 62 Sleepy Creek Drive 2022 City State Zip Code Transaction ID: SA11AI.17105 NC Clayton 27520 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society Chief Legal Officer General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Scott, Shawn, , , Date of Receipt Mailing Address PO Box 27167 12 2022 City Zip Code State Transaction ID: SA11AI.17094 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) General Contribution North Carolina Medical Society Deputy EVP, Operations and Administra Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

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for each category of the Detailed Summary Page 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 Medical Society Federal Political Education and Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Scott, Shawn, , , Date of Receipt Mailing Address PO Box 27167 2022 City Zip Code State Transaction ID: SA11AI.17106 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Deputy EVP, Operations and Administra North Carolina Medical Society General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Simmons, Evan, , , Date of Receipt Mailing Address 8509 Buscot Court 2022 City State Zip Code Transaction ID: SA11AI.17095 NC Raleigh 27615 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society Director, Executive and Board Services **General Contribution** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Simmons, Evan, , , Date of Receipt Mailing Address 8509 Buscot Court 22 2022 City State Zip Code Transaction ID : SA11AI.17107 NC Raleigh 27615 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **General Contribution** North Carolina Medical Society Director, Executive and Board Services Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 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 Medical Society Federal Political Education and Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skipper, William, Alan, Date of Receipt Mailing Address PO Box 27167 2022 City Zip Code State Transaction ID: SA11AI.17096 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CAE, CMP Vice President North Carolina Medical Society General Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Skipper, William, Alan, , Date of Receipt Mailing Address PO Box 27167 2022 City State Zip Code Transaction ID: SA11AI.17108 NC Raleigh 27611 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Carolina Medical Society CAE, CMP Vice President **General Contribution** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 230.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... 720.00