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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Battle for Congress				
ADDRESS (number and street) PO Box 480305				
CITY, STATE, and ZIP CODE				
Charlotte	NC 2826	69		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (St		4. FEC IDENTIFICATION	N NUMBER
Mr. George E Battle III	,	NC 12	C00545400	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	05/04	/2014
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
Bessie F Baker	Charlotte-Mecklenb	urg Schools	day, year)	
10653 Stone Bunker Dr			04/30/2014	1000.00
10000 Glorie Bullici Bi	Transaction ID : VN	I8VGCP6K34		
Charlotte NC 28227-7036	Occupation			
	Teacher		Date (month,	Amount
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Mildred Hines	Name of Employer		day, year)	Amount
Willarea Hilles	AME Zion Church		04/30/2014	1000.00
123 Sagefield Sq				
	Transaction ID : VN8VGCP6KK0		-	
Canton MS 39046-7800	Occupation Bishop			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
Louis Hunter Sr.	AME Zion Church		day, year)	
4255 Laurel Grove Trce			04/30/2014	1000.00
4255 Eduloi Giove Tree	Transaction ID : VN	I8VGCP6HY1		
	Occupation			
Suwanee GA 30024-6928	Bishop		_	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
Saire Jones	Terminix		05/04/0044	500.00
767 Rockwood Dr			05/01/2014	500.00
	Transaction ID : VN	18VGCP6WR9		
Rock Hill SC 29730-5814	Occupation			
	Call Center Agent		Date (month,	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Saire Jones	Name of Employer Terminix		day, year)	7 tillodili
Saile Jolles	Terriiin		05/01/2014	500.00
767 Rockwood Dr				
	Transaction ID : VN Occupation	18VGCP6WT5	-	
Rock Hill SC 29730-5814	Call Center Agent			
SIGNATURE (optional) Mr. Albert Lee Richardson Jr.	!	DATE For further information contact:		
	[Electronically Filed]	05/04/2014	999 E Street, N\	lection Commission N, Washington, DC 20463 -9530, Local 202-694-1100

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.



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: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F6A Transaction ID:

Amended to show contributions of single individual (merged contacts).

Form/Schedule: Transaction ID:

Image# 14960873838 PAGE 3 / 3

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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1. NAME OF COMMITTEE IN FULL]	
Battle for Congress			_	
ADDRESS (number and street) PO Box 48030	5			
CITY, STATE, and ZIP CODE			-	
Charlotte		NC 28269	continuatio	n page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
Mr. George E Battle III		House NC 12	C00545400	
5. ISTHIS AN AMENDMENT? NO, THIS IS	A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	05/04	2014
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Shelton Jones		Verizon	day, year)	
			05/02/2014	1000.00
1761 Stratford Xing SE				
		Transaction ID : VN8VGCPGC12 Occupation	_	
Conyers	GA 30013-6432	Sales		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Joyce Lovett		School Nutrition Association of South	day, year)	
Joyce Lovell		School Nutrition Association of South	05/02/2014	1000.00
6620 Valleybrook Rd			03/02/2014	1000.00
		Transaction ID: VN8VGCPHY01		
		Occupation		
Columbia	SC 29206-1053	Executive Director		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
James M Sloan		AME Zion Church	day, year)	
			04/30/2014	1500.00
4129 Swindon Ct				
		Transaction ID : VN8VGCP6J65		
Charlotte	NC 28215-5355	Occupation		
	NC 20210 0000	Presiding Elder	Data (month	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
		Occupation	_	
		Cosapanon		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
		rame or Employer	day, year)	
		Occupation		