



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

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="2012"/>	<input type="text" value="3224.61"/>	<input type="text" value="3224.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4239.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="13452.00"/>	<input type="text" value="14763.00"/>
(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="17691.60"/>	<input type="text" value="17987.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5379.20"/>	<input type="text" value="5675.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12312.40"/>	<input type="text" value="12312.40"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

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

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).....	1785.96	1785.96
(ii) Unitemized .....	10614.04	11500.04
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12400.00	13286.00
(b) Political Party Committees .....	502.00	552.00
(c) Other Political Committees (such as PACs).....	525.00	900.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	13427.00	14738.00
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.).....	25.00	25.00
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 Transfers (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))..... ▶	13452.00	14763.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13452.00	14763.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	5379.20	5675.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5379.20	5675.21
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) 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 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)) ..	5379.20	5675.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5379.20	5675.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	13427.00	14738.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13427.00	14738.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5379.20	5675.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5379.20	5675.21

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

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

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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. Judith Armento**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 304 Holly Lane  
 City State Zip Code  
 Cape Carteret NC 28584  
 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 ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2012  
**Transaction ID : SA11AI.9074**  
 Amount of Each Receipt this Period  
 450.00  
 convention theme basket auction donation

**B. George Cleveland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 Campbell Place  
 City State Zip Code  
 Jacksonville NC 28546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State of NC Rep. in NC House  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2012  
**Transaction ID : SA11AI.9243**  
 Amount of Each Receipt this Period  
 20.00  
 50-50 raffle donation

**C. George Cleveland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 Campbell Place  
 City State Zip Code  
 Jacksonville NC 28546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State of NC Rep. in NC House  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2012  
**Transaction ID : SA11AI.9307**  
 Amount of Each Receipt this Period  
 35.00  
 pass the hat donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.00  
**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 OF 18
	<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**

Full Name (Last, First, Middle Initial)  
**A. George Cleveland**

Mailing Address 224 Campbell Place

City Jacksonville State NC Zip Code 28546

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**305.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 28 / 2012**

**Transaction ID : SA11AI.9461**

Amount of Each Receipt this Period  
**50.00**

donation for gun raffle ticket(s)

Full Name (Last, First, Middle Initial)  
**B. Virginia Cooper**

Mailing Address 2617 Church St.

City Winterville State NC Zip Code 28590

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 ▼  
**255.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2012**

**Transaction ID : SA11AI.9075**

Amount of Each Receipt this Period  
**60.00**

convention theme basket auction donation

Full Name (Last, First, Middle Initial)  
**C. Virginia Cooper**

Mailing Address 2617 Church St.

City Winterville State NC Zip Code 28590

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 ▼  
**270.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 07 / 2012**

**Transaction ID : SA11AI.9308**

Amount of Each Receipt this Period  
**15.00**

pass the hat donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.00</b>
<b>TOTAL</b> 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 8 OF 18
	<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. Fred Grube**  
Full Name (Last, First, Middle Initial)

Mailing Address 117 Clubhouse Dr.

City Cape Carteret	State NC	Zip Code 28584
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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 ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2012  
**Transaction ID : SA11AI.9076**

Amount of Each Receipt this Period  
 500.00  
 convention theme basket auction donation(s)

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

Mailing Address 143 W. Holly trail

City Southern Shores	State NC	Zip Code 27949
-------------------------	-------------	-------------------

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 ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2012  
**Transaction ID : SA11AI.9435**

Amount of Each Receipt this Period  
 275.00  
 In-kind - Donation of article(s) for basket auction

**C. Bob Pruett**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 695

City Beaufort	State NC	Zip Code 28516
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pruett Rentals	Occupation self-employed
------------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2012  
**Transaction ID : SA11AI.9276**

Amount of Each Receipt this Period  
 20.00  
 50-50 raffle donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	795.00
<b>TOTAL</b> 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 9 OF 18
	<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	<input type="checkbox"/> 17

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

**A. Bob Pruett**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer Pruetts Rentals Occupation self-employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **220.96**

Date of Receipt **04 / 28 / 2012**

**Transaction ID : SA11AI.9403**

Amount of Each Receipt this Period **15.96**

In-kind - Donation of article(s) for basket auction

**B. Bob Pruett**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer Pruetts Rentals Occupation self-employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.96**

Date of Receipt **05 / 07 / 2012**

**Transaction ID : SA11AI.9316**

Amount of Each Receipt this Period **10.00**

pass the hat donation

**C. Bob Pruett**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 695

City Beaufort State NC Zip Code 28516

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

Name of Employer Pruetts Rentals Occupation self-employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **340.96**

Date of Receipt **05 / 30 / 2012**

**Transaction ID : SA11AI.9349**

Amount of Each Receipt this Period **110.00**

donation for gun raffle ticket(s)

**SUBTOTAL** of Receipts This Page (optional)..... **135.96**

**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 10 OF 18
	<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**

Full Name (Last, First, Middle Initial) <b>A. Norm Sanderson</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2012 <b>Transaction ID : SA11AI.9078</b>
Mailing Address 269 Bennett Rd.		Amount of Each Receipt this Period 175.00 convention theme basket auction donation
City Minnesott Beach	State NC	Zip Code 28510
FEC ID number of contributing federal political committee. C	Name of Employer self	Occupation child-care worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>B. Ashley Woolard</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2012 <b>Transaction ID : SA11AI.9226</b>
Mailing Address 7504 Market St. Ext.		Amount of Each Receipt this Period 20.00 donation for Zak book at convention
City Washington	State NC	Zip Code 27889
FEC ID number of contributing federal political committee. C	Name of Employer Pamlico Insurance Agency	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. Ashley Woolard</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2012 <b>Transaction ID : SA11AI.9219</b>
Mailing Address 7504 Market St. Ext.		Amount of Each Receipt this Period 30.00 convention registration(s)
City Washington	State NC	Zip Code 27889
FEC ID number of contributing federal political committee. C	Name of Employer Pamlico Insurance Agency	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1785.96

**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 11 OF 18
<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**

Full Name (Last, First, Middle Initial) <b>A. Craven County GOP</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2012 <b>Transaction ID : SA11B.9310</b>
Mailing Address PO Box 13466		Amount of Each Receipt this Period 100.00
City New Bern	State NC	Zip Code 28561
FEC ID number of contributing federal political committee. C C00000000	Name of Employer	Occupation Convention program ad
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>B. Crystal Coast GOP Womens Club</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2012 <b>Transaction ID : SA11B.8849</b>
Mailing Address PO Box 1492		Amount of Each Receipt this Period 25.00
City Morehead City	State NC	Zip Code 28557
FEC ID number of contributing federal political committee. C C00000000	Name of Employer	Occupation conv. table rental
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) <b>C. Crystal Coast GOP Womens Club</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2012 <b>Transaction ID : SA11B.8850</b>
Mailing Address PO Box 1492		Amount of Each Receipt this Period 50.00
City Morehead City	State NC	Zip Code 28557
FEC ID number of contributing federal political committee. C C00000000	Name of Employer	Occupation ad in conv. program
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 12 OF 18
<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**

Full Name (Last, First, Middle Initial) <b>A. Crystal Coast Republican Men's Club</b>		Date of Receipt
Mailing Address PO Box 253		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City State Zip Code Morehead City NC 28557		<b>Transaction ID : SA11B.8856</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00000000"/>		Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer	Occupation	donation for cookbooks
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="80.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Crystal Coast Republican Men's Club</b>		Date of Receipt
Mailing Address PO Box 253		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City State Zip Code Morehead City NC 28557		<b>Transaction ID : SA11B.8857</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00000000"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer	Occupation	ad in conv. program
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="130.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Onslow County Republican Party</b>		Date of Receipt
Mailing Address PO Box 716		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Jacksonville NC 28541		<b>Transaction ID : SA11B.9044</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00000000"/>		Amount of Each Receipt this Period <input type="text" value="29.00"/>
Name of Employer	Occupation	delegate fees
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="29.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="159.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 13 OF 18
<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. Pamlico County GOP**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 122

City Merritt	State NC	Zip Code 28556
-----------------	-------------	-------------------

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  
M M M / D D D / Y Y Y Y Y Y  
04 / 12 / 2012  
**Transaction ID : SA11B.8851**

Amount of Each Receipt this Period  
50.00  
ad in conv. program

**B. Pitt County GOP**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 8498

City Greenville	State NC	Zip Code 27835
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FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 20 / 2012  
**Transaction ID : SA11B.9045**

Amount of Each Receipt this Period  
58.00  
delegate fees

**C. Pitt County GOP**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 8498

City Greenville	State NC	Zip Code 27835
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FEC ID number of contributing federal political committee. **C** C00000000

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2012  
**Transaction ID : SA11B.9448**

Amount of Each Receipt this Period  
60.00  
In-kind - Donation of article(s) for basket auction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	168.00
<b>TOTAL</b> This Period (last page this line number only).....▶	502.00

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

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

FOR LINE NUMBER: PAGE 14 OF 18  
(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**

Full Name (Last, First, Middle Initial)  
**A. Al Pam Republican Club**  
 Mailing Address 842 Gourd Neck Rd.  
 City Roper State NC Zip Code 27970  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2012  
**Transaction ID : SA11C.9305**  
 Amount of Each Receipt this Period  
 100.00  
 3rd District convention program ad

Full Name (Last, First, Middle Initial)  
**B. Bob Steinburg for NC House**  
 Mailing Address 103 S. Granville  
 City Edenton State NC Zip Code 27932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2012  
**Transaction ID : SA11C.9312**  
 Amount of Each Receipt this Period  
 100.00  
 Convention program ad

Full Name (Last, First, Middle Initial)  
**C. Lawson 4 House Committee**  
 Mailing Address 904 Clipper Ct.  
 City Kill Devil Hills State NC Zip Code 27948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 75.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2012  
**Transaction ID : SA11C.8853**  
 Amount of Each Receipt this Period  
 25.00  
 table rental at convention

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**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 15 OF 18  
(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	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

**A. WALTER JONES COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3962

City Greenville	State NC	Zip Code 27636
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FEC ID number of contributing federal political committee. **C** C00305052

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2012

**Transaction ID : SA11C.9087**

Amount of Each Receipt this Period  
300.00

convention program ad donation

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	525.00

**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**

Full Name (Last, First, Middle Initial)

**A. Kim Hendrix**

Mailing Address 1830 Blue Banks Farm Rd

City Greenville State NC Zip Code 27834

Purpose of Disbursement  
Reimb for convention materials

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2012

Transaction ID : **SB21B.9051**

Amount of Each Disbursement this Period

548.60

Full Name (Last, First, Middle Initial)

**B. Kim Hendrix**

Mailing Address 1830 Blue Banks Farm Rd

City Greenville State NC Zip Code 27834

Purpose of Disbursement  
reimb. for convention mailings

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2012

Transaction ID : **SB21B.9301**

Amount of Each Disbursement this Period

56.25

Full Name (Last, First, Middle Initial)

**C. Ingalls & Assoc.**

Mailing Address 115 N. Respass St.

City Washington State NC Zip Code 27889

Purpose of Disbursement  
Convention program printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2012

Transaction ID : **SB21B.8913**

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1304.85

**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**

Full Name (Last, First, Middle Initial)

**A. Ingalls & Assoc.**

Mailing Address 115 N. Respass St.

City Washington State NC Zip Code 27889

Purpose of Disbursement  
balance on conv. program printing

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2012

**Transaction ID : SB21B.9052**

Amount of Each Disbursement this Period

47.25

Full Name (Last, First, Middle Initial)

**B. Patrick Patterson**

Mailing Address 143 W. Holly trail

City Southern Shores State NC Zip Code 27949

Purpose of Disbursement  
In-kind - Donation of article(s) for basket auction

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2012

**Transaction ID : SB21B.9443**

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

**C. Brian Purnell**

Mailing Address 200 Royal Tern Dr.

City Sneads Ferry State NC Zip Code 28460

Purpose of Disbursement  
50-50 award balance

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2012

**Transaction ID : SB21B.9300**

Amount of Each Disbursement this Period

66.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

388.25

**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**

Full Name (Last, First, Middle Initial)

**A. The Meeting Place Catering**

Mailing Address 225 West Main St.

City Washington State NC Zip Code 27889

Purpose of Disbursement  
convention catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2012

**Transaction ID : SB21B.9055**

Amount of Each Disbursement this Period

1989.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1989.00

3682.10