

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RESULTS FOR NC, INC.

ADDRESS (number and street) P.O. BOX 28634

Check if different than previously reported. (ACC) RALEIGH NC 27611

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00545152

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [04] / [28] / [2022] through [06] / [30] / [2022]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

GANTT, CHARLES, , ,

Type or Print Name of Treasurer

Signature of Treasurer GANTT, CHARLES, , , [Electronically Filed] Date [07] / [12] / [2022]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

RESULTS FOR NC, INC.

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="2022"/>	<input type="text"/>	<input type="text" value="7257.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="691423.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="665000.00"/>	<input type="text" value="1882500.00"/>
(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="1356423.88"/>	<input type="text" value="1889757.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1300574.17"/>	<input type="text" value="1833908.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="55849.71"/>	<input type="text" value="55849.71"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

RESULTS FOR NC, INC.

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).....	365000.00	1582500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	365000.00	1582500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	300000.00	300000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	665000.00	1882500.00
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.).....	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 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)).....▶	665000.00	1882500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	665000.00	1882500.00

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	95854.61	96124.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	95854.61	96124.61
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)	1204719.56	1737783.60
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	1300574.17	1833908.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1300574.17	1833908.21

DETAILED SUMMARY PAGE
of Disbursements

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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)	665000.00	1882500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	665000.00	1882500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	95854.61	96124.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	95854.61	96124.61

**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 6 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
RESULTS FOR NC, INC.

A. AMERICANS FOR A BALANCED BUDGET

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 N BLOODWORTH ST

City RALEIGH	State NC	Zip Code 27601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
770000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2022

Transaction ID : SA11AI.4573

Amount of Each Receipt this Period
100000.00

Memo Item

B. AMERICANS FOR A BALANCED BUDGET

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 N BLOODWORTH ST

City RALEIGH	State NC	Zip Code 27601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2022

Transaction ID : SA11AI.4575

Amount of Each Receipt this Period
60000.00

Memo Item

C. PULLIAM, RUSTY, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1970 HENDERSONVILLE RD

City ASHEVILLE	State NC	Zip Code 28803
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED COMMERCIAL REAL ESTATE DEVELC

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2022

Transaction ID : SA11AI.4577

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165000.00
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 7 OF 28
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESULTS FOR NC, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SALAME, RYAN, D, ,

Mailing Address **74 ROOD HILL RD**

City SANDISFIELD	State MA	Zip Code 01255
----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) FTX DIGITAL MARKETS	Occupation (for Individual) CEO
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700000.00

Date of Receipt
05 / 12 / 2022

Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
200000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200000.00
TOTAL This Period (last page this line number only).....▶	365000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESULTS FOR NC, INC.

A. NATIONAL ASSOCIATION OF REALTORS CONGRESSIONAL FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 NORTH MICHIGAN AVENUE
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C** C00488742
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2022
Transaction ID : SA11C.4578
 Amount of Each Receipt this Period
 300000.00
 Memo Item

B.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 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
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 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
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300000.00
TOTAL This Period (last page this line number only).....▶	300000.00

**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"/> 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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. BULLDOG COMPLIANCE		Date of Disbursement MM / DD / YYYY 05 / 17 / 2022
Mailing Address 138 CONANT ST STE 202		FEC Identification Number C [] Transaction ID : SB21B.4581
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [] 2027.24
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. BULLDOG COMPLIANCE		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022
Mailing Address 138 CONANT ST STE 202		FEC Identification Number C [] Transaction ID : SB21B.4582
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [] 1526.54
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 04 / 29 / 2022
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4583
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [] 25.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3578.78
TOTAL This Period (last page this line number only).....▶	[]

**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"/> 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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.			Date of Disbursement MM / DD / YYYY 04 / 29 / 2022	
Mailing Address 1445-A LAUGHLIN AVE				
City MCLEAN	State VA	Zip Code 22101	FEC Identification Number C	
Purpose of Disbursement BANK FEE			Transaction ID : SB21B.4584	
Candidate Name			Amount of Each Disbursement this Period 25.00	
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) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.			Date of Disbursement MM / DD / YYYY 05 / 02 / 2022	
Mailing Address 1445-A LAUGHLIN AVE				
City MCLEAN	State VA	Zip Code 22101	FEC Identification Number C	
Purpose of Disbursement BANK FEE			Transaction ID : SB21B.4585	
Candidate Name			Amount of Each Disbursement this Period 25.00	
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) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.			Date of Disbursement MM / DD / YYYY 05 / 02 / 2022	
Mailing Address 1445-A LAUGHLIN AVE				
City MCLEAN	State VA	Zip Code 22101	FEC Identification Number C	
Purpose of Disbursement BANK FEE			Transaction ID : SB21B.4586	
Candidate Name			Amount of Each Disbursement this Period 25.00	
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) ▼		<input type="checkbox"/> Memo Item	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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"/> 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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial)
A. CHAIN BRIDGE BANK, N.A.

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4587

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CHAIN BRIDGE BANK, N.A.

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4588

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CHAIN BRIDGE BANK, N.A.

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4589

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

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

**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"/> 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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 11 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4590	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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: []		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4591	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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: []		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4592	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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).....▶	[] 75.00
TOTAL This Period (last page this line number only).....▶	[]

**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"/> 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

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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 16 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4593	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 17 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4594	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 06 / 16 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.4595	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
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).....▶	[] 75.00
TOTAL This Period (last page this line number only).....▶	[]

**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"/> 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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 06 / 21 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4596	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [REDACTED] 25.00
Purpose of Disbursement BANK FEE		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4597	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [REDACTED] 25.00
Purpose of Disbursement BANK FEE		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) C. DICKINSON WRIGHT PLLC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2022	
Mailing Address 2600 W. BIG BEAVER STE 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4599	
City TROY	State MI	Zip Code 48084	Amount of Each Disbursement this Period [REDACTED] 14312.33
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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).....▶	[REDACTED] 14362.33
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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)
RESULTS FOR NC, INC.

Full Name (Last, First, Middle Initial) A. DICKINSON WRIGHT PLLC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022
Mailing Address 2600 W. BIG BEAVER STE 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4600 Amount of Each Disbursement this Period 6363.50
City TROY	State MI	Zip Code 48084
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MACON CONSULTING		Date of Disbursement MM / DD / YYYY 05 / 13 / 2022
Mailing Address 126 N LONGMEADOW RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4601 Amount of Each Disbursement this Period 66250.00
City GREENVILLE	State NC	Zip Code 27858
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MACON CONSULTING		Date of Disbursement MM / DD / YYYY 06 / 16 / 2022
Mailing Address 126 N LONGMEADOW RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4602 Amount of Each Disbursement this Period 5000.00
City GREENVILLE	State NC	Zip Code 27858
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	77613.50
TOTAL This Period (last page this line number only).....▶	95854.61

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ADVANTAGE INC.
Mailing Address 9420 BONITA BEACH ROAD SE SUITE 2
City BONITA SPRINGS State FL Zip Code 34135
Purpose of Expenditure VOTER PHONE CALLS
Name of Federal Candidate: EDWARDS, CHUCK, , , Support
Office Sought: House District: 11 State: NC
Disbursement For: Primary

Full Name of Payee CONFLUENT IMPACT COMMUNICATIONS
Mailing Address 7300 HUDSON BLVD STE 270
City SAINT PAUL State MN Zip Code 55128
Purpose of Expenditure DIGITAL VOTER CONTACT
Name of Federal Candidate: CAWTHORN, DAVID MADISON, , , Oppose
Office Sought: House District: 11 State: NC
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 107125.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , ,

[Electronically Filed]

Date 07 / 12 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONFLUENT IMPACT COMMUNICATIONS
Mailing Address 7300 HUDSON BLVD STE 270
City SAINT PAUL State MN Zip Code 55128
Purpose of Expenditure DIGITAL VOTER CONTACT
Name of Federal Candidate: EDWARDS, CHUCK, , , Support
Office Sought: House District: 11 State: NC
Calendar Year-To-Date Per Election for Office Sought 1487739.10
Disbursement For: Primary 2022

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: TV
Name of Federal Candidate: CAWTHORN, DAVID MADISON, , , Oppose
Office Sought: House District: 11 State: NC
Calendar Year-To-Date Per Election for Office Sought 1223489.10
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 275125.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date 07 / 12 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: RADIO
Date of Public Distribution/Dissemination 05 / 10 / 2022
Amount 31000.00
Transaction ID : SE.4535
Date of Disbursement or Obligation 05 / 09 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1254489.10
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: TV
Date of Public Distribution/Dissemination 05 / 11 / 2022
Amount 64500.00
Transaction ID : SE.4536
Date of Disbursement or Obligation 05 / 09 / 2022

Name of Federal Candidate: EDWARDS, CHUCK, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1318989.10
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 95500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , [Electronically Filed] Date 07 / 12 / 2022
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: TV
Date of Public Distribution/Dissemination 05 / 11 / 2022
Amount 64500.00
Transaction ID : SE.4537
Date of Disbursement or Obligation 05 / 09 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1383489.10
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PRODUCTION COST: TV AND RADIO ADS
Date of Public Distribution/Dissemination 05 / 11 / 2022
Amount 11000.00
Transaction ID : SE.4538
Date of Disbursement or Obligation 05 / 09 / 2022

Name of Federal Candidate: EDWARDS, CHUCK, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1394489.10
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 75500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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GANTT, CHARLES, , [Electronically Filed] Date 07 / 12 / 2022
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PRODUCTION COST: TV AND RADIO ADS
Date of Public Distribution/Dissemination 05/11/2022
Amount 19000.00
Transaction ID : SE.4539
Date of Disbursement or Obligation 05/09/2022
Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Office Sought: House District: 11 State: NC
Disbursement For: Primary General 2022

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: TV
Date of Public Distribution/Dissemination 05/13/2022
Amount 90000.00
Transaction ID : SE.4559
Date of Disbursement or Obligation 05/12/2022
Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Office Sought: House District: 11 State: NC
Disbursement For: Primary General 2022

(a) SUBTOTAL of Itemized Independent Expenditures 109000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date 07/12/2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MEDIA AD VENTURES
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300
City SPRINGFIELD State VA Zip Code 22152
Purpose of Expenditure PLACED MEDIA: TV
Name of Federal Candidate: EDWARDS, CHUCK, , ,
Calendar Year-To-Date Per Election for Office Sought 1707813.74

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure DIRECT MAIL & POSTAGE
Name of Federal Candidate: CAWTHORN, DAVID MADISON, , ,
Calendar Year-To-Date Per Election for Office Sought 664540.34

(a) SUBTOTAL of Itemized Independent Expenditures 161476.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date

07 / 12 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure DIGITAL VOTER CONTACT
Date of Public Distribution/Dissemination 04/30/2022
Amount 4950.00
Transaction ID : SE.4489
Date of Disbursement or Obligation 04/30/2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure PLACED MEDIA: TV
Date of Public Distribution/Dissemination 05/03/2022
Amount 238000.00
Transaction ID : SE.4500
Date of Disbursement or Obligation 05/02/2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 242950.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date 07/12/2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 05 / 03 / 2022
Amount 31000.00
Transaction ID : SE.4501
Date of Disbursement or Obligation 05 / 02 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 938490.34
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure PRODUCTION COST: TV AD
Category/Type
Date of Public Distribution/Dissemination 05 / 03 / 2022
Amount 10000.00
Transaction ID : SE.4502
Date of Disbursement or Obligation 05 / 02 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 948490.34
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 41000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , [Electronically Filed] Date 07 / 12 / 2022
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00545152 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item WINNING ENDEAVORS, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 03 / 2022						
Mailing Address P.O. BOX 160115	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3000.00 </div> Transaction ID : SE.4503 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 02 / 2022						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>NASHVILLE</td> <td>TN</td> <td>37216-0115</td> </tr> </table>		City	State	Zip Code	NASHVILLE	TN	37216-0115
City		State	Zip Code				
NASHVILLE	TN	37216-0115					
Purpose of Expenditure PRODUCTION COST: RADIO AD							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CAWTHORN, DAVID MADISON, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>11</u> State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 951490.34 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item WINNING ENDEAVORS, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 02 / 2022						
Mailing Address P.O. BOX 160115	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 4950.00 </div> Transaction ID : SE.4604 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 02 / 2022						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>NASHVILLE</td> <td>TN</td> <td>37216-0115</td> </tr> </table>		City	State	Zip Code	NASHVILLE	TN	37216-0115
City		State	Zip Code				
NASHVILLE	TN	37216-0115					
Purpose of Expenditure TEXT MESSAGES							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CAWTHORN, DAVID MADISON, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>11</u> State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 956440.34 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 7950.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 07 / 12 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure TEXT MESSAGES
Date of Public Distribution/Dissemination 05 / 06 / 2022
Amount 4950.00
Transaction ID : SE.4528
Date of Disbursement or Obligation 05 / 06 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 961390.34
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure DIRECT MAIL & POSTAGE
Date of Public Distribution/Dissemination 05 / 10 / 2022
Amount 24098.76
Transaction ID : SE.4533
Date of Disbursement or Obligation 05 / 06 / 2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 985489.10
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 29048.76
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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GANTT, CHARLES, , [Electronically Filed] Date 07 / 12 / 2022
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00545152 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item WINNING ENDEAVORS, LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 11 / 2022	
Mailing Address P.O. BOX 160115		Amount M M / D D / Y Y Y Y Y Y 3319.80	
City NASHVILLE	State TN	Zip Code 37216-0115	Transaction ID : SE.4552 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2022
Purpose of Expenditure PLACED MEDIA: DIGITAL ADVERTISING		Category/Type 	
Name of Federal Candidate: EDWARDS, CHUCK, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ 	

Full Name of Payee <input type="checkbox"/> Memo Item WINNING ENDEAVORS, LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 11 / 2022	
Mailing Address P.O. BOX 160115		Amount M M / D D / Y Y Y Y Y Y 22754.84	
City NASHVILLE	State TN	Zip Code 37216-0115	Transaction ID : SE.4553 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2022
Purpose of Expenditure PLACED MEDIA: DIGITAL ADVERTISING		Category/Type 	
Name of Federal Candidate: CAWTHORN, DAVID MADISON, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ 	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	 26074.64
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 07 / 12 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure PRODUCTION COST: DIGITAL ADS
Category/Type
Date of Public Distribution/Dissemination 05/12/2022
Amount 4000.00
Transaction ID : SE.4557
Date of Disbursement or Obligation 05/12/2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1587813.74
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure DIGITAL ADVERTISING
Category/Type
Date of Public Distribution/Dissemination 05/14/2022
Amount 18645.37
Transaction ID : SE.4564
Date of Disbursement or Obligation 05/14/2022

Name of Federal Candidate: EDWARDS, CHUCK, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1726459.11
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 22645.37
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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GANTT, CHARLES, ,

[Electronically Filed]

Date

07/12/2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESULTS FOR NC, INC.
FEC IDENTIFICATION NUMBER C C00545152

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee WINNING ENDEAVORS, LLC
Mailing Address P.O. BOX 160115
City NASHVILLE State TN Zip Code 37216-0115
Purpose of Expenditure DIGITAL ADVERTISING
Date of Public Distribution/Dissemination 05/14/2022
Amount 11324.49
Transaction ID : SE.4565
Date of Disbursement or Obligation 05/14/2022

Name of Federal Candidate: CAWTHORN, DAVID MADISON, ,
Support Oppose
Office Sought: House District: 11
President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1737783.60
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 11324.49, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 1204719.56

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , [Electronically Filed] Date 07/12/2022
Signature