

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Committee to Elect Harry Warren

ADDRESS (number and street) 201 Kingsbridge
 Check if different than previously reported. (ACC) Salisbury NC 28144

2. **FEC IDENTIFICATION NUMBER** ▼ C00613208 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
NC 13

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 07 / 2016 in the State of NC
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2016 through 05 / 18 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Melissa Hill
Signature of Treasurer Melissa Hill *[Electronically Filed]* Date 05 / 25 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Harry Warren

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6600.00	8600.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6600.00	8600.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21413.51	28610.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	21413.51	28610.68
8. Cash on Hand at Close of Reporting Period (from Line 27).....	989.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	35660.03	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Committee to Elect Harry Warren

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4600.00	6600.00
(ii) Unitemized.....	2000.00	2000.00
(iii) TOTAL of contributions from individuals ▶	6600.00	8600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6600.00	8600.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1000.00	12000.00
(b) All Other Loans.....	7000.00	9000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	8000.00	21000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	14600.00	29600.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21413.51	28610.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	21413.51	28610.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7802.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14600.00
25. SUBTOTAL (add Line 23 and Line 24).....	22402.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21413.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	989.32

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Greg Alcorn

Mailing Address 118-B S Main Street

City Salisbury State NC Zip Code 28144

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

Name of Employer CEO Occupation Global Contacts

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Matt Barr

Mailing Address 19 Pine Tree Rd

City Salisbury State NC Zip Code 28144

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

Name of Employer Carolina Color Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Morris Clements

Mailing Address 306 Third Creek Church Rd

City Cleveland State NC Zip Code 27013

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Ronald Cox

Mailing Address 14709 Thompson Rd

City Mint Hill State NC Zip Code 28227

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

Name of Employer Self Employed Occupation Business

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
500.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Carl Fortune

Mailing Address 312 Hamilton Rd

City Lexington State NC Zip Code 27295

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

Name of Employer Kernodle Clinic Occupation IT Analyst

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Elaine Hewitt

Mailing Address 306 Third Creek Church Rd

City Cleveland State NC Zip Code 27013

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
David Hurst

Mailing Address 217 Cedarwood Drive

City Salisbury State NC Zip Code 28147

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

Name of Employer United Beverage Occupation Associate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
250.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Bryan Overcash

Mailing Address 4 Pine Tree Road

City Salisbury State NC Zip Code 28144

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

Name of Employer Global Contacts Occupation Business Associate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
J O Riley

Mailing Address 10 Dogwood Road

City Salisbury State NC Zip Code 28144

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

Name of Employer Central Carolina Occupation Insurance Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period
250.00

Memo Item Contribution

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Glen Scott

Mailing Address 105 Seminole Lane

City Lexington State NC Zip Code 27295

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
400.00

Memo Item Contribution

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)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

400.00

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Harry Warren

Mailing Address 201 Kingsbridge Rd

City Salisbury State NC Zip Code 28144

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

Name of Employer NC Occupation Representative Dist 77

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **12000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2016

Transaction ID : SA11D.4243

Amount of Each Receipt this Period
1130.95

Memo Item
 Campaign Expenses Paid Personally to be Reimbursed Debt#4244

B. Full Name (Last, First, Middle Initial)
Harry Warren

Mailing Address 201 Kingsbridge Rd

City Salisbury State NC Zip Code 28144

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

Name of Employer NC Occupation Representative Dist 77

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **12000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11D.4278

Amount of Each Receipt this Period
1644.30

Memo Item
 Mileage 4/01-5/18/16 to be reimbursed: 3,045 mi @ .54/mi Ref Debt id#4279

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)

Election Cycle-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).....

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

0.00

0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 25
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Harry Warren

Mailing Address 201 Kingsbridge Rd

City Salisbury State NC Zip Code 28144

FEC ID number of contributing federal political committee.

Name of Employer NC Occupation Representative Dist 77

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA13A.4234

Amount of Each Receipt this Period

Memo Item
 Loan to Campaign--Personal funds

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

Full Name (Last, First, Middle Initial) A. Morris Clements		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Mailing Address 306 Third Creek Church Rd		Transaction ID : SA13B.4222	
City Cleveland State NC Zip Code 27013	Amount of Each Receipt this Period 1600.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item <input type="checkbox"/> Loan to Campaign		
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Elaine Hewitt		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Mailing Address 306 Third Creek Church Rd		Transaction ID : SA13B.4221	
City Cleveland State NC Zip Code 27013	Amount of Each Receipt this Period 1400.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item <input type="checkbox"/> Loan to Campaign		
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 2500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. John Thorne		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 05 / 2016	
Mailing Address 4151 Saltwater Blvd		Transaction ID : SA13B.4160	
City Tampa State FL Zip Code 33615	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item <input type="checkbox"/> Campaign Loan--Personal funds		
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 2300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial)
Theresa Thorne

Mailing Address 4151 Saltwater Blvd

City Tampa State FL Zip Code 33615

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA13B.4159

Amount of Each Receipt this Period
700.00

Memo Item
 Loan to Campaign--Personal funds

B. Full Name (Last, First, Middle Initial)
Catherine Warren

Mailing Address 201 Kingsbridge Rd.

City Salisbury State NC Zip Code 28144

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

Name of Employer Wells Fargo Occupation Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA13B.4191

Amount of Each Receipt this Period
1000.00

Memo Item
 Loan to Campaign--Personal Funds

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)

Election Cycle-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).....

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

1700.00

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

Full Name (Last, First, Middle Initial) A. McClanahan Creative Design		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 1307 Rhonda Drive		Amount of Each Disbursement this Period 1375.28
City Christiana	State TN	
Zip Code 37037	Purpose of Disbursement 5,000 Tri-fold Campaign Mailers and Postage fees Inv#W42516	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.4201
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MJH Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address 9265 Fisher Rd.		Amount of Each Disbursement this Period 900.00
City Rockwell	State NC	
Zip Code 28138	Purpose of Disbursement Accounting Services Inv#20508	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.4223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Snap Productions		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address P O Box 9023		Amount of Each Disbursement this Period 690.00
City Greensboro	State NC	
Zip Code 27429	Purpose of Disbursement Rhino Times Political Ad--5/12, 5/19, 5/26/16	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.4224
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2965.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

Full Name (Last, First, Middle Initial) A. Westmoreland Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 2020 E Dixon Blvd		Amount of Each Disbursement this Period 8252.71
City Shelby	State NC	
Zip Code 28152	Purpose of Disbursement District Postcards--Countywide Distribution & Postage Inv#9138	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.4198
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Westmoreland Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 2020 E Dixon Blvd		Amount of Each Disbursement this Period 814.27
City Shelby	State NC	
Zip Code 28152	Purpose of Disbursement Door Hangers Inv#9132	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.4200
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Westmoreland Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 2020 E Dixon Blvd		Amount of Each Disbursement this Period 4461.84
City Shelby	State NC	
Zip Code 28152	Purpose of Disbursement Mailer: Ellection Vote inv#9288	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.4230
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13528.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Committee to Elect Harry Warren

Full Name (Last, First, Middle Initial) A. Westmoreland Printing			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016	
Mailing Address 2020 E Dixon Blvd			Amount of Each Disbursement this Period 4461.84	
City Shelby	State NC	Zip Code 28152	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Mailers: Voter ID Inv#9289		Category/ Type	Transaction ID : SB17.4231	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		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:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		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:				

SUBTOTAL of Disbursements This Page (optional)	4461.84
TOTAL This Period (last page this line number only)	20955.94

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4098**

LOAN SOURCE Full Name (Last, First, Middle Initial) PERSONAL FUNDS <input type="checkbox"/> Memo Item Harry Warren	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 201 Kingsbridge Rd	

City	State	ZIP Code
Salisbury	NC	28144

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11000.00	0.00	11000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 21 / Y 2016 Y	M / D / Y none Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="11000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4234

Committee to Elect Harry Warren

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2016

Harry Warren

Primary

General

Other (specify) ▼

Mailing Address

201 Kingsbridge Rd

City

State

ZIP Code

Salisbury

NC

28144

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05

D 09

Y 2016 Y

M M

D D

Y None Y

0.00

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4222**

LOAN SOURCE Full Name (Last, First, Middle Initial) Morris Clements	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 306 Third Creek Church Rd		

City	State	ZIP Code
Cleveland	NC	27013

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1600.00	0.00	1600.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 07 / 2016	none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1600.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4221**

LOAN SOURCE Full Name (Last, First, Middle Initial) Elaine Hewitt	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 306 Third Creek Church Rd		

City	State	ZIP Code
Cleveland	NC	27013

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1400.00	0.00	1400.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 05	D 07	Y 2016 Y	M / D / Y none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1400.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4160**

LOAN SOURCE Full Name (Last, First, Middle Initial) John Thorne	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4151 Saltwater Blvd		

City	State	ZIP Code
Tampa	FL	33615

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 05 / Y 2016 Y	M M / D D / Y none Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	2300.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4100**
Committee to Elect Harry Warren

LOAN SOURCE Full Name (Last, First, Middle Initial) Theresa Thorne	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4151 Saltwater Blvd		

City	State	ZIP Code
Tampa	FL	33615

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 27 / Y 2016	M / D / Y none			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	2000.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4159**

LOAN SOURCE Full Name (Last, First, Middle Initial) Theresa Thorne	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4151 Saltwater Blvd		

City	State	ZIP Code
Tampa	FL	33615

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
700.00	0.00	700.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 05 / Y 2016 Y	M M / D D / Y none Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	700.00
TOTALS This Period (last page in this line only).....	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Harry Warren** Transaction ID : **SC/10.4191**

LOAN SOURCE Full Name (Last, First, Middle Initial) Catherine Warren	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 201 Kingsbridge Rd.		

City	State	ZIP Code
Salisbury	NC	28144

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 21 / Y 2016 Y	M M / D D / Y none Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1000.00
TOTALS This Period (last page in this line only).....	▶	21000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Batchelor Campaign Services, Inc.

Mailing Address 4500 Manor Village Way, Apt 25

City State Zip Code
Raleigh NC 27612

Nature of Debt (Purpose):
Inv#1127 Campaign Fundraising

Outstanding Balance Beginning This Period	Transaction ID : SD10.4245	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
773.50	0.00	773.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Harry Warren

Mailing Address 201 Kingsbridge Rd

City State Zip Code
Salisbury NC 28144

Nature of Debt (Purpose):
Campaign Expenses Paid Personally--to be Reimbursed; memo#4243

Outstanding Balance Beginning This Period	Transaction ID : SD10.4244	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1130.95	0.00	1130.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Harry Warren

Mailing Address 201 Kingsbridge Rd

City State Zip Code
Salisbury NC 28144

Nature of Debt (Purpose):
Mileage: 4/01-5/18/16 to be reimbursed -- 3,045 mi @ .54/mi Ref id#4270

Outstanding Balance Beginning This Period	Transaction ID : SD10.4279	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1644.30	0.00	1644.30

1) SUBTOTALS This Period This Page (optional)	3548.75
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Committee to Elect Harry Warren

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Westmoreland Printing	Nature of Debt (Purpose): Mailer: Social Security Invoice 9290
Mailing Address 2020 E Dixon Blvd	
City State Zip Code Shelby NC 28152	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4275	
Amount Incurred This Period 5555.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 5555.64

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Westmoreland Printing	Nature of Debt (Purpose): Mailer: 2nd Amendment Rights Invoice #9291
Mailing Address 2020 E Dixon Blvd	
City State Zip Code Shelby NC 28152	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4276	
Amount Incurred This Period 5555.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 5555.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	11111.28
2) TOTALS This Period (last page this line number only)	14660.03
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	21000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	35660.03