

VANDEVENTER BLACK LLP

Sherri L. Gahagen
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101 W. Main Street • 500 World Trade Center • Norfolk, Virginia 23510 • Office 757.446.8600 • Fax 757.446.8670

April 15, 2013

RECEIVED
2013 APR 16 AM 9:49
FEC MAIL CENTER

VIA FEDERAL EXPRESS

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

Re: Report of Receipts and Disbursements – FEC Form 3X
First Quarter 2013

Dear Sir or Madame:

Enclosed please find our Report of Receipts and Disbursements, FEC Form 3X for reporting period ending March 31, 2013. Should you have any questions or need additional information, please feel free to give me a call.

Very truly yours,



Sherri L. Gahagen
Assistant to Jeff Bergren

/slg

Enclosure (1)

4843-5145-5507, v. 1

13031054879

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Vandevanter Black LLP PAC

Report Covering the Period: From: ^M0 ^M1 / ^D0 ^D1 / ^Y2 ^Y0 ^Y1 ^Y3 To: ^M0 ^M3 / ^D3 ^D1 / ^Y2 ^Y0 ^Y1 ^Y3

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

| | | |
|---|---------------|---------------|
| 6. (a) Cash on Hand January 1, 2 0 1 3 | 2 0 1 3 | 1 7 0 0 5 1 1 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 1 7 0 0 5 1 1 | |
| (c) Total Receipts (from Line 19)..... | 0 0 0 | 0 0 0 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 1 7 0 0 5 1 1 | 1 7 0 0 5 1 1 |
| <hr/> | | |
| 7. Total Disbursements (from Line 31)..... | 5 9 0 0 0 0 0 | 5 9 0 0 0 0 0 |
| <hr/> | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 1 1 1 0 5 1 1 | 1 1 1 0 5 1 1 |
| <hr/> | | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 0 0 | |
| <hr/> | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 0 0 | |

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

13031054881

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 0 1 / 0 1 / 2 0 1 3 To: ^{M M / D D / Y Y Y Y} 0 3 / 3 1 / 2 0 1 3

13031054882

| 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)..... | 0 0 0 | 0 0 0 |
| (ii) Unitemized..... | 0 0 0 | 0 0 0 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 0 0 0 | 0 0 0 |
| (b) Political Party Committees..... | 0 0 0 | 0 0 0 |
| (c) Other Political Committees (such as PACs)..... | 0 0 0 | 0 0 0 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶ | 0 0 0 | 0 0 0 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0 0 0 | 0 0 0 |
| 13. All Loans Received..... | 0 0 0 | - |
| 14. Loan Repayments Received..... | 0 0 0 | 0 0 0 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0 0 0 | 0 0 0 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0 0 0 | 0 0 0 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0 0 0 | 0 0 0 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0 0 0 | 0 0 0 |
| (b) Levin Funds (from Schedule H5)..... | 0 0 0 | 0 0 0 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0 0 0 | 0 0 0 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 0 0 0 | 0 0 0 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 0 0 0 | 0 0 0 |

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 0 0 | 0 0 0 |
| (ii) Non-Federal Share | 0 0 0 | 0 0 0 |
| (b) Other Federal Operating Expenditures | 0 0 0 | 0 0 0 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0 0 0 | 0 0 0 |
| 22. Transfers to Affiliated/Other Party Committees | 0 0 0 | 0 0 0 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 0 0 0 | 0 0 0 |
| 24. Independent Expenditures (use Schedule E) | 0 0 0 | 0 0 0 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) | 0 0 0 | 0 0 0 |
| 26. Loan Repayments Made | 0 0 0 | 0 0 0 |
| 27. Loans Made | 0 0 0 | 0 0 0 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0 0 0 | 0 0 0 |
| (b) Political Party Committees | 0 0 0 | 0 0 0 |
| (c) Other Political Committees (such as PACs) | 0 0 0 | 0 0 0 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0 0 0 | 0 0 0 |
| 29. Other Disbursements | 0 0 0 | 0 0 0 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0 0 0 | 0 0 0 |
| (ii) "Levin" Share | 0 0 0 | 0 0 0 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0 0 0 | 0 0 0 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0 0 0 | 0 0 0 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 0 0 0 | 0 0 0 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 0 0 0 | 0 0 0 |

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 0 0 0 | 0 0 0 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0 0 0 | 0 0 0 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0 0 0 | 0 0 0 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0 0 0 | 0 0 0 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0 0 0 | 0 0 0 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0 0 0 | 0 0 0 |

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**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)

PAGE 1 OF 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)
Vandevanter Black LLP PAC

| | | | |
|--|--|--|-------------------|
| Full Name* (Last, First, Middle Initial) A. The Phil Berger Committee | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 9660 Falls of Neuse Road, Suite 138 #224 | | Amount of Each Disbursement this Period , 5 0 0 . 0 0 | |
| City Raleigh | State NC | | Zip Code 27615 |
| Purpose of Disbursement Contribution | 0 1 1 | | |
| Candidate Name Senator Phil Berger | Category/ Type | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: | | |

| | | | |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Stein, Josh (Josh Stein for NC Senate Committee) | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 220 Hillsborough Street | | Amount of Each Disbursement this Period , 2 0 0 . 0 0 | |
| City Raleigh | State NC | | Zip Code 27603 |
| Purpose of Disbursement Contribution | 0 1 1 | | |
| Candidate Name Josh Stein | Category/ Type | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: | | |

| | | | |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Brunstetter, Peter | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 2521 Vitting Road | | Amount of Each Disbursement this Period , 2 0 0 . 0 0 | |
| City Winston-Salem | State NC | | Zip Code 27104 |
| Purpose of Disbursement Contribution | 0 1 1 | | |
| Candidate Name Peter Brunstetter | Category/ Type | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: | | |

| | |
|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | , , 9 0 0 . 0 0 |
| TOTAL This Period (last page this line number only).....▶ | , , |

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**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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandevanter Black LLP PAC

| | | |
|--|---|---|
| Full Name* (Last, First, Middle Initial) Clodfelter, Daniel G. | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 |
| Mailing Address 523 Clement Avenue | | Amount of Each Disbursement this Period , , 2 0 0 . 0 0 |
| City Charlotte | State NC | |
| Zip Code 28204 | | |
| Purpose of Disbursement Contribution | 0 1 1 | |
| Candidate Name Daniel Clodfelter | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) contribution | |
| State: NC | District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) Goolsby, Thom | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 |
| Mailing Address Post Office Box 388 | | Amount of Each Disbursement this Period , , 2 0 0 . 0 0 |
| City Wilmington | State NC | |
| Zip Code 28402 | | |
| Purpose of Disbursement Contribution | 0 1 1 | |
| Candidate Name Thom Goolsby | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) contribution | |
| State: NC | District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) Stevens, Sarah | | Date of Disbursement 0 1 / 2 5 / 2 0 1 3 |
| Mailing Address 2161 Margaret Drive | | Amount of Each Disbursement this Period , , 2 0 0 . 0 0 |
| City Mount Airy | State NC | |
| Zip Code 27030 | | |
| Purpose of Disbursement Contribution | 0 1 1 | |
| Candidate Name Peter Brunstetter | | Category/ Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) contribution | |
| State: NC | District: | |

| | |
|--|------------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | , , 6 0 0 . 0 0 |
| TOTAL This Period (last page this line number only).....▶ | , , |

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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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
 Vandevanter Black LLP PAC

Full Name* (Last, First, Middle Initial)

A. Senator E.S. "Buck" Newton

Mailing Address
 300 N. Salisbury Street, Room 408

City Raleigh State NC Zip Code 27603-5925

Purpose of Disbursement
 Contribution

Candidate Name
 E. S. Newton

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District: 11

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

B. Senator Daniel T. Blue, Jr.

Mailing Address
 16 W. Jones Street, Room 1117

City Raleigh State NC Zip Code 27601-2808

Purpose of Disbursement
 Contribution

Candidate Name
 Daniel T. Blue, Jr.

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District: 14

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

C. Speaker Charles Thomas "Thom" Tillis

Mailing Address
 16 W. Jones Street, Room 2304

City Raleigh State NC Zip Code 27601-1096

Purpose of Disbursement
 Contribution

Candidate Name
 Charles Thomas Tillis

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District: 98

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, 5 0 0 . 0 0

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

, 9 0 0 . 0 0

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

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**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)

PAGE 4 OF 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandevanter Black LLP PAC

Full Name* (Last, First, Middle Initial)

| | | | |
|--|--|--|--|
| A. | | Date of Disbursement | |
| Stam, Paul "Skip" | | 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 300 N. Salisbury Street, Room 612 | | | |
| City Raleigh | State NC | Zip Code 27603-5925 | |
| Purpose of Disbursement Contribution | | 0 1 1 | |
| Candidate Name Paul Stam | | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: 37 | | |
| | | Amount of Each Disbursement this Period , 2 0 0 . 0 0 | |

| | | | |
|--|--|--|--|
| B. | | Date of Disbursement | |
| Hall, Larry Dwight | | 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 300 N. Salisbury Street, Room 506 | | | |
| City Raleigh | State NC | Zip Code 27603-5925 | |
| Purpose of Disbursement Contribution | | 0 1 1 | |
| Candidate Name Larry Hall | | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: 29 | | |
| | | Amount of Each Disbursement this Period , 2 0 0 . 0 0 | |

| | | | |
|--|--|--|--|
| C. | | Date of Disbursement | |
| Starns, Edgar V. | | 0 1 / 2 5 / 2 0 1 3 | |
| Mailing Address 300 N. Salisbury Street, Room 301F | | | |
| City Raleigh | State NC | Zip Code 27603-5925 | |
| Purpose of Disbursement Contribution | | 0 1 1 | |
| Candidate Name Edgar V. Starns | | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: 87 | | |
| | | Amount of Each Disbursement this Period , 2 0 0 . 0 0 | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | , 6 0 0 . 0 0 |
| TOTAL This Period (last page this line number only).....▶ | , , . |

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**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)

PAGE 5 OF 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandevanter Black LLP PAC

Full Name* (Last, First, Middle Initial)

A. Samuelson, Ruth

Mailing Address
16 W. Jones Street, Room 2226

City Raleigh State NC Zip Code 27601-1096

Purpose of Disbursement
Contribution

Candidate Name
Ruth Samuelson

Office Sought: House Senate President
State: NC District: 104

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

B. McGrady, Charles Worden

Mailing Address
300 N. Salisbury Street, Room 419B

City Raleigh State NC Zip Code 27603-5925

Purpose of Disbursement
Contribution

Candidate Name
Charles Worden McGrady

Office Sought: House Senate President
State: NC District: 117

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

C. Bryan, Robert P.

Mailing Address
300 N. Salisbury Street, Room 536

City Raleigh State NC Zip Code 27603-5925

Purpose of Disbursement
Contribution

Candidate Name
Robert P. Bryan III

Office Sought: House Senate President
State: NC District: 88

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

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

, , 6 0 0 . 0 0

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

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**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)

PAGE 6 OF 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandevanter Black LLP PAC

Full Name* (Last, First, Middle Initial)

A.

Fulghum III, James S.

Mailing Address
300 N. Salisbury Street, Room 602

City Raleigh State NC Zip Code 27603-5925

Purpose of Disbursement
Contribution

Candidate Name
James S. Fulghum III

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District: 49

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

B.

Tine, Paul

Mailing Address
16 W. Jones Street, Room 1307

City Raleigh State NC Zip Code 27601-1096

Purpose of Disbursement
Contribution

Candidate Name
Paul Tines

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District:

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

Full Name (Last, First, Middle Initial)

C.

Murry, Thomas

Mailing Address
16 W. Jones Street, Room 2121

City Raleigh State NC Zip Code 27601-1096

Purpose of Disbursement
Contribution

Candidate Name
Thomas "Tom" Murry

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) contribution

State: NC District: 41

Date of Disbursement

0 1 / 2 5 / 2 0 1 3

Amount of Each Disbursement this Period

, , 2 0 0 . 0 0

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

, , 6 0 0 . 0 0

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

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**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)

PAGE 7 OF 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandeventer Black LLP PAC

Full Name* (Last, First, Middle Initial)

A. Goodwin, Wayne

Mailing Address
430 N. Salisbury Street

City Raleigh State NC Zip Code 27603-5926

Purpose of Disbursement
Contribution (Commissioner of Insurance)

Candidate Name

Office Sought: House Senate President
State: NC District:

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement
0 1 ' 2 5 ' 2 0 1 3

Amount of Each Disbursement this Period
, 2 0 0 . 0 0

Category/Type
0 1 1

B. Senate Democratic Caucus NCDP - Senate Caucus

Mailing Address
220 Hillsborough Street

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: NC District:

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement
0 1 ' 2 5 ' 2 0 1 3

Amount of Each Disbursement this Period
, 2 5 0 . 0 0

Category/Type
0 1 1

C. House Democratic Caucus

Mailing Address
220 Hillsborough Street

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: NC District:

Disbursement For: Primary General Other (specify) contribution

Date of Disbursement
0 1 ' 2 5 ' 2 0 1 3

Amount of Each Disbursement this Period
, 2 5 0 . 0 0

Category/Type
0 1 1

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| SUBTOTAL of Disbursements This Page (optional).....▶ | , , 7 0 0 . 0 0 |
| TOTAL This Period (last page this line number only).....▶ | , , . |

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**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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Vandeventer Black LLP PAC

Full Name* (Last, First, Middle Initial)

| | | | |
|---|--|---|--|
| A. House Republican Caucus | | Date of Disbursement 01 / 25 / 2013 | |
| Mailing Address 1506 Hillsborough Street | | | |
| City Raleigh | State NC | Zip Code 27605 | |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period 0 1 1 , 5 0 0 . 0 0 | |
| Candidate Name | | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: | | |

| | | | |
|---|--|---|--|
| B. Senate Republican Caucus | | Date of Disbursement 01 / 25 / 2013 | |
| Mailing Address 1506 Hillsborough Street | | | |
| City Raleigh | State NC | Zip Code 27605 | |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period 0 1 1 , 5 0 0 . 0 0 | |
| Candidate Name | | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ contribution | | |
| State: NC | District: | | |

| | | | |
|--|---|---|--|
| C. | | Date of Disbursement M M / D D / Y Y Y Y | |
| Mailing Address | | | |
| City | State | Zip Code | |
| Purpose of Disbursement | | Amount of Each Disbursement this Period | |
| Candidate Name | | Category/ Type | |
| 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) ▼ contribution | | |
| State: | District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | , 1 0 0 0 . 0 0 |
| TOTAL This Period (last page this line number only).....▶ | , 5 9 0 0 . 0 0 |

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Federal Election Commission
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USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed-Exp* Shipping Date
4/15/13
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JmP
 PREPARER

4/16/13
 DATE PREPARED

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