PAGE 1/9

Image# 15951123881

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	Ar		uthorized Co	DENIS DENIS	'		Office Use Only
NAME OF COMMITTEE (in		PE OR PRINT	▼	Example: If typing over the lines.	ıg, type	12FE4M5	
KEADLE FOR	CONGRE	SS 2012					
ADDRESS (number ar		113 SEA HIDE	COURT				
Check if dif than previous reported. (A	usly	MOORESVILL	E			NC L	28117
2. FEC IDENTIFIC	CATION NUM	BER ▼	CITY			STATE A	ZIP CODE
C C0049999	54		3. IS THIS REPORT	X NEV	OR	AMENE (A)	STATE ▼ DISTRICT NC
	eports: 5 Quarterly Rep	ort (Q1)	(b) 12-Day P	RE-Election Report Primary (12F	P)	General (1 Special (1	
	Quarterly Report		Election	on M M	/ D D /	Y Y Y	in the State of
January	/ 31 Year-End F	Report (YE)	(c) 30-Day P	OST-Election Re	port for the:		
			L	General (300	à)	Runoff (30	DR) Special (30S)
Termina	ation Report (TE	ER)	Election	on	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	M M 01	/ 01 /	Y Y Y Y Y 2015	through	M M M 03	/ 31 /	Y Y Y Y Y 2015
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 Kevin Todd Lakey							
Signature of Treasurer Kevin Todd Lakey [Electronically Filed] Date							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2/9

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KEADLE FOR CONGRESS 2012

F	Report	Covering the Period: From:	01	o: M 03 / 31 / Y 2015	
			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))	0.00	429744.13	
	(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))	0.00	429744.13	
7.	Net	Operating Expenditures			
	(a)	Total Operating Expenditures (from Line 17)	0.00	690527.24	
	(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))	0.00	690527.24	
8.		orting Period (from Line 27)	0.00		
9.	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)	0.00		
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	263878.78		

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 PAGE 3 / 9 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

KEADLE FOR CONGRESS 2012

01 01 2015 03 31 2015 Report Covering the Period: From: To:

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. CONTRIBUTIONS (other than loans) FROM	Л:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	336480.99	
(ii) Unitemized	0.00	68763.14	
(iii) TOTAL of contributions from individuals	0.00	405244.13	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(such as PACs)	0.00	24500.00	
(d) The Candidate	0.00	0.00	
(add Lines 11(a)(iii), (b), (c), and (d))	0.00	429744.13	
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3. LOANS:			
(a) Made or Guaranteed by the Candidate	0.00	397000.00	
(b) All Other Loans(c) TOTAL LOANS	0.00	0.00	
(add Lines 13(a) and (b))	0.00	397000.00	
4. OFFSETS TO OPERATING EXPENDITURES			
(Refunds, Rebates, etc.)	0.00	0.00	
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	826744.13	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 9

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	0.00	690527.24	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19.	LOAN REPAYMENTS:			
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	130000.00	
	(b) Of All Other Loans	0.00	0.00	
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	130000.00	
20.	REFUNDS OF CONTRIBUTIONS TO:	,	,	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
		0.00	0.00	
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
	(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	2750.67	345.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	2750.67	820872.24	
	III. CASH SUI	MMARY		
23.	CASH ON HAND AT BEGINNING OF REPORT	TING PERIOD	2750.67	
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	0.00	
25.	SUBTOTAL (add Line 23 and Line 24)		2750.67	
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	ı Line 22)	2750.67	
27.	CASH ON HAND AT CLOSE OF REPORTING	PERIOD	0.00	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:	PAGE 5 OF 9			
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 17 18 20a 20b	19a 19b 20c X 21			
hay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.					

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) KEADLE FOR CONGRESS 2012				
Full Name (Last, First, Middle Initial) A. SCOTT KEADLE Mailing Address 440 050 URF COURT	Date of Disbursement 03 27 2015			
Mailing Address 113 SEA HIDE COURT				
City State Zip C MOORESVILLE NC 2811	, and and or East Propared the Control			
Purpose of Disbursement Partial loan payment to candidate - accounting adjustment to zero-part	2750.67 ial loan 009 Transaction ID : SB21.7888			
Candidate Name	Category/ Type			
President Other (specify)	General			
State: NC District: 08 Full Name (Last, First, Middle Initial)				
A.	Date of Disbursement			
Mailing Address				
City State Zip C	Amount of Each Disbursement this Period			
Purpose of Disbursement Candidate Name	Category/			
Office Sought: House Disbursement For: Senate Primary Other (specify) State: District:	General Type			
Full Name (Last, First, Middle Initial)	Date of Disbursement			
Mailing Address	M M / D D / Y Y Y Y			
City State Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement				
Candidate Name	Category/ Type			
Office Sought: House Disbursement For:	General			
2750.67				
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)	2750.67			

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

X	13a
	13b

(check only one) Detailed Summary Page Transaction ID: SC/10.4323 NAME OF COMMITTEE (In Full) **KEADLE FOR CONGRESS 2012** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary SCOTT KEADLE General Mailing Address Other (specify) \blacktriangledown 113 SEA HIDE COURT City State ZIP Code NC 28117 MOORESVILLE Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 70000.00 0.00 70000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D30 2011 12/31/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 70000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

Detailed Summary Page Transaction ID: SC/10.5209 NAME OF COMMITTEE (In Full) **KEADLE FOR CONGRESS 2012** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary SCOTT KEADLE General Mailing Address Other (specify) \blacktriangledown 113 SEA HIDE COURT State ZIP Code City NC 28117 MOORESVILLE Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 180000.00 0.00 180000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D16^D ^M 02^M Ž012 0.00 12/31/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 180000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

×	13a
	13b

(check only one) Detailed Summary Page Transaction ID: SC/10.7282 NAME OF COMMITTEE (In Full) **KEADLE FOR CONGRESS 2012** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary SCOTT KEADLE General Mailing Address X Other (specify) 113 SEA HIDE COURT Runoff City State ZIP Code NC 28117 MOORESVILLE Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 87000.00 83121.22 3878.78 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 06^M 20 Ž012 0.00 12/31/2012 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 3878.78 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

X 13a

OF

Detailed Summary Page 13b Transaction ID: SC/10.7872 NAME OF COMMITTEE (In Full) **KEADLE FOR CONGRESS 2012** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary SCOTT KEADLE General Mailing Address X Other (specify) 113 SEA HIDE COURT Runoff City State ZIP Code NC 28117 MOORESVILLE Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M 09 Ž012 0.00 12/31/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) 263878.78 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.