

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
Hudson for Congress

ADDRESS (number and street) PO Box 5053
 Check if different than previously reported. (ACC) Concord NC 28027-1500

2. **FEC IDENTIFICATION NUMBER** ▼ C C00504522 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
NC 08

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 05 / 06 / 2014 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 / 2014 through 04 / 16 / 2014

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 Shawn Kocher

Signature of Treasurer Shawn Kocher [Electronically Filed] Date 09 / 29 / 2014

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
Hudson for Congress

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))....	5835	939051.68
(b) Total Contribution Refunds (from Line 20(d))	0	2000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	5835	937051.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45359.62	599464.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	42	30171.29
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45317.62	569293.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	455787.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5000	

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

Hudson for Congress

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).....	4450	295605.18
(ii) Unitemized.....	385	22357.84
(iii) TOTAL of contributions from individuals ▶	4835	317963.02
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	1000	621088.66
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5835	939051.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	37000.94
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	42	30171.29
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	378.58
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5877	1006602.49

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45359.62	599464.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	1000
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	1000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	2000
21. OTHER DISBURSEMENTS	2000	36600
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	47359.62	638064.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	497270.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5877
25. SUBTOTAL (add Line 23 and Line 24).....	503147.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47359.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	455787.49

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Updated the current period Unitemized Contributions on line 11(a)(ii) from \$285 to \$385.

Form/Schedule:
Transaction ID:

**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 26
	<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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
H. Terry Hutchens

Mailing Address 1117 Offshore Drive

City Fayetteville State NC Zip Code 28305-5250

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

Name of Employer Hutchens, Senter, Kellam Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF5345

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jack M. Victory

Mailing Address 4012 Ethan Thomas Drive

City Clinton State MD Zip Code 20735-4420

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

Name of Employer Capitol Hill Consulting Occupation Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : A-CF5332

Amount of Each Receipt this Period
500
 online

C. Full Name (Last, First, Middle Initial)
Melvin F. Graham

Mailing Address 2701 Coltsgate Road Suite 300

City Charlotte State NC Zip Code 28211-3594

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

Name of Employer Graham Enterprises Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : A-CF5315

Amount of Each Receipt this Period
2000
 online

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

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

3500.00

**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 26
	<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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Melvin F. Graham

Mailing Address 2701 Coltsgate Road
Suite 300

City Charlotte State NC Zip Code 28211-3594

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

Name of Employer Graham Enterprises Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : A-CF5316

Amount of Each Receipt this Period
500
 online

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

Mailing Address PO Box 829

City Norwood State NC Zip Code 28128-0829

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

Name of Employer Iron Horse Auction Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF5346

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
William L. Shotwell

Mailing Address 1016 Manor Glen Way

City Raleigh State NC Zip Code 27615-2238

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

Name of Employer Lumberton Chevrolet Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : A-CF5328

Amount of Each Receipt this Period
250

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

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

950.00

4450.00

**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 26
	<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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
Political Action Committee Of The American Association Of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue NE
Floor 1

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : A-CF5326

Amount of Each Receipt this Period
 1000

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**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 9 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Citibank NA		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1500 Boltonfield Street		Amount of Each Disbursement this Period 471.69 Transaction ID : B-E-5336
City Columbus	State OH Zip Code 43228-3669	
Purpose of Disbursement hotel	Category/Type 001	
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. Anedot		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 10156 Perkins Rowe Suite 311F		Amount of Each Disbursement this Period 99.07 Transaction ID : B-E-5317
City Baton Rouge	State LA Zip Code 70810-1799	
Purpose of Disbursement cc fees	Category/Type 001	
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. NC Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 25000		Amount of Each Disbursement this Period 63 Transaction ID : B-E-5269
City Raleigh	State NC Zip Code 27640-0640	
Purpose of Disbursement payroll taxes	Category/Type 001	
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).....	633.76
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 10 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2000
City Columbia	State SC	Zip Code 29202-7431
Purpose of Disbursement advertising	Category/ Type 001	
Candidate Name		Transaction ID : B-E-5259
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. The Stewart Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 26508		Amount of Each Disbursement this Period 1276.1
City Raleigh	State NC	Zip Code 27611-6508
Purpose of Disbursement printing	Category/ Type 001	
Candidate Name		Transaction ID : B-E-5171
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. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 25
City Phoenix	State AZ	Zip Code 85034-3802
Purpose of Disbursement flight	Category/ Type 001	
Candidate Name		Transaction ID : B-E-5281
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).....	3301.10
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 11 OF 26	
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Metro Mailing & Printing Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 109 Winona Street		Amount of Each Disbursement this Period 283.22 Transaction ID : B-E-5334
City Charlotte	State NC Zip Code 28203-4149	
Purpose of Disbursement postage	Category/Type 001	
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. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 5.5 Transaction ID : B-E-5285
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement flight	Category/Type 001	
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 42.78 Transaction ID : B-E-5265
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement food	Category/Type 001	
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).....	331.50
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 12 OF 26	
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Metro Mailing & Printing Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 109 Winona Street		Amount of Each Disbursement this Period 327.82 Transaction ID : B-E-5169
City Charlotte	State NC	
Zip Code 28203-4149	Purpose of Disbursement printing	Category/ Type 001
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. O3 Strategies, Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 25363		Amount of Each Disbursement this Period 50 Transaction ID : B-E-5261
City Raleigh	State NC	
Zip Code 27611-5363	Purpose of Disbursement website	Category/ Type 001
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. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 10715 David Taylor Drive		Amount of Each Disbursement this Period 348.87 Transaction ID : B-E-5270
City Charlotte	State NC	
Zip Code 28262-1283	Purpose of Disbursement payroll taxes	Category/ Type 001
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).....	726.69
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 13 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 39.95
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement QB	Transaction ID : B-E-5349
Candidate Name	001 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)	
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1215 Concord Parkway N		Amount of Each Disbursement this Period 24.06
City Concord	State NC	
Zip Code 28025-4325	Purpose of Disbursement shipping	Transaction ID : B-E-5323
Candidate Name	001 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)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ashley M. Beaver		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 401 N Church Street Apt. 407		Amount of Each Disbursement this Period 2539.3
City Charlotte	State NC	
Zip Code 28202-1184	Purpose of Disbursement event planner	Transaction ID : B-E-5257
Candidate Name	001 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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2603.31
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 26
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 182 Howard Street # 8		Amount of Each Disbursement this Period 8.61 Transaction ID : B-E-5322
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement taxi 001 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) B. Reid Political Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3502 Halcyon Drive		Amount of Each Disbursement this Period 14669.4 Transaction ID : B-E-5263
City Alexandria State VA Zip Code 22305-1330	Purpose of Disbursement fundraising 001 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. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1480 US Highway 29 North		Amount of Each Disbursement this Period 170.87 Transaction ID : B-E-5348
City Concord State NC Zip Code 28025	Purpose of Disbursement toner 001 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).....	14848.88
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 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. The Fork, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 3200 Fork Road			Amount of Each Disbursement this Period 1667.78 Transaction ID : B-E-5344
City Norwood	State NC	Zip Code 28128-6562	
Purpose of Disbursement event deposit		Category/ Type 001	
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. Pinehurst Resort			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 80 Carolina Vista Drive			Amount of Each Disbursement this Period 299 Transaction ID : B-E-5351
City Pinehurst	State NC	Zip Code 28374-9251	
Purpose of Disbursement hotel		Category/ Type 001	
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. US Airways			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4000 E Sky Harbor Boulevard			Amount of Each Disbursement this Period 836 Transaction ID : B-E-5282
City Phoenix	State AZ	Zip Code 85034-3802	
Purpose of Disbursement flight		Category/ Type 001	
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)	2802.78
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 16 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Krystal M Kocher		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 508 Geary Street NW		Amount of Each Disbursement this Period 479.41 Transaction ID : B-E-5343
City Concord	State NC	
Zip Code 28027-8210	Purpose of Disbursement payroll	Category/ Type 001
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. Metro Mailing & Printing Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 109 Winona Street		Amount of Each Disbursement this Period 537.94 Transaction ID : B-E-5170
City Charlotte	State NC	
Zip Code 28203-4149	Purpose of Disbursement printing	Category/ Type 001
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. Uber Technologies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 182 Howard Street # 8		Amount of Each Disbursement this Period 9.24 Transaction ID : B-E-5324
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement taxi	Category/ Type 001
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).....	1026.59
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 17 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1950 Transaction ID : B-E-5168
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement backoffice Candidate Name Category/Type 001	
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. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 5501 Josh Birmingham Parkway		Amount of Each Disbursement this Period 10.98 Transaction ID : B-E-5337
City Charlotte State NC Zip Code 28208-5750	Purpose of Disbursement flight Candidate Name Category/Type 001	
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. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1215 Concord Parkway N		Amount of Each Disbursement this Period 38.42 Transaction ID : B-E-5318
City Concord State NC Zip Code 28025-4325	Purpose of Disbursement shipping Candidate Name Category/Type 001	
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).....	1999.40
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 18 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Hotels.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 10440 N Central Expressway Suite 400		Amount of Each Disbursement this Period 430.5 Transaction ID : B-E-5319
City Dallas State TX Zip Code 75231-2228	Purpose of Disbursement hotel 001 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) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 10156 Perkins Rowe Suite 311F		Amount of Each Disbursement this Period 19.8 Transaction ID : B-E-5333
City Baton Rouge State LA Zip Code 70810-1799	Purpose of Disbursement cc fees 001 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. The Sky Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 709 E Durant Avenue		Amount of Each Disbursement this Period 24.32 Transaction ID : B-E-5280
City Aspen State CO Zip Code 81611-2037	Purpose of Disbursement hotel 001 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).....	474.62
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 19 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Charlotte Motor Speedway		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 600		Amount of Each Disbursement this Period 12012 Transaction ID : B-E-5258
City Concord	State NC	
Zip Code 28026-0600	Purpose of Disbursement event tickets	Category/ Type 001
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. We The Pizza		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 303 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 66.6 Transaction ID : B-E-5321
City Washington	State DC	
Zip Code 20003-1148	Purpose of Disbursement food	Category/ Type 001
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. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 368 George W Liles Parkway NW		Amount of Each Disbursement this Period 36 Transaction ID : B-E-5272
City Concord	State NC	
Zip Code 28027-2406	Purpose of Disbursement payroll fee	Category/ Type 001
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).....	12114.60
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 20 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Pinehurst Resort		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 80 Carolina Vista Drive		Amount of Each Disbursement this Period 320 Transaction ID : B-E-5350
City Pinehurst	State NC Zip Code 28374-9251	
Purpose of Disbursement hotel	Category/Type 001	
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. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 5501 Josh Birmingham Parkway		Amount of Each Disbursement this Period 6.99 Transaction ID : B-E-5278
City Charlotte	State NC Zip Code 28208-5750	
Purpose of Disbursement flight	Category/Type 001	
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. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 25 Transaction ID : B-E-5283
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement flight	Category/Type 001	
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).....	351.99
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 21 OF 26			
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Employment Security Commission of North Carolina		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 26504		Amount of Each Disbursement this Period 79.92 Transaction ID : B-E-5271
City Raleigh	State NC	
Zip Code 27611-6504	Purpose of Disbursement payroll taxes	Category/Type 001
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. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 832 Transaction ID : B-E-5284
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement flight	Category/Type 001
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. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1650 Transaction ID : B-E-5262
City Columbia	State SC	
Zip Code 29202-7431	Purpose of Disbursement advertising	Category/Type 001
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).....	2561.92
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 22 OF 26	
	<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)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. The Sky Hotel		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 709 E Durant Avenue		Amount of Each Disbursement this Period 1262.34
City Aspen	State CO Zip Code 81611-2037	
Purpose of Disbursement hotel	Category/Type 001	Transaction ID : B-E-5277
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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 MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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).....	1262.34
TOTAL This Period (last page this line number only).....	45039.48

**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 23 OF 26
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Hudson for Congress

Full Name (Last, First, Middle Initial) A. Palazzo For Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 13155 Shriners Boulevard Suite B		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-5325
City Biloxi	State MS	
Zip Code 39532-8745	Purpose of Disbursement contribution	Category/Type 011
Candidate Name Steven Mccarty Palazzo	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MS	District: 04	

Full Name (Last, First, Middle Initial) B. Comstock For Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 831		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-5268
City McLean	State VA	
Zip Code 22101-0831	Purpose of Disbursement contribution	Category/Type 011
Candidate Name Barbara J. Comstock	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: 05	District: 10	

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	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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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

NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): backoffice
Mailing Address 205 Pennsylvania Avenue SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 1950	Transaction ID : SD10-DEBT5168	
Amount Incurred This Period 0	Payment This Period 1950	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Stewart Group	Nature of Debt (Purpose): printing
Mailing Address PO Box 26508	
City State Zip Code Raleigh NC 27611-6508	

Outstanding Balance Beginning This Period 1276.1	Transaction ID : SD10-DEBT5171	
Amount Incurred This Period 0	Payment This Period 1276.1	Outstanding Balance at Close of This Period 0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reid Political Consulting, LLC	Nature of Debt (Purpose): Performance Bonus
Mailing Address 3502 Halcyon Drive	
City State Zip Code Alexandria VA 22305-1330	

Outstanding Balance Beginning This Period 5000	Transaction ID : SD10-DEBT3260	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 5000

1) SUBTOTALS This Period This Page (optional)	5000.00
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)
Hudson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Metro Mailing & Printing Company	Nature of Debt (Purpose): printing
Mailing Address 109 Winona Street	
City State Zip Code Charlotte NC 28203-4149	

Outstanding Balance Beginning This Period 865.76	Transaction ID : SD10-DEBT5170	
Amount Incurred This Period 0	Payment This Period 865.76	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Charlotte Motor Speedway	Nature of Debt (Purpose): event tickets
Mailing Address PO Box 600	
City State Zip Code Concord NC 28026-0600	

Outstanding Balance Beginning This Period 12012	Transaction ID : SD10-DEBT5258	
Amount Incurred This Period 0	Payment This Period 12012	Outstanding Balance at Close of This Period 0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Push Digital	Nature of Debt (Purpose): advertising
Mailing Address PO Box 7431	
City State Zip Code Columbia SC 29202-7431	

Outstanding Balance Beginning This Period 2000	Transaction ID : SD10-DEBT5259	
Amount Incurred This Period 0	Payment This Period 2000	Outstanding Balance at Close of This Period 0

1) SUBTOTALS This Period This Page (optional)	0.00
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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Hudson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Charles Hughes/Treasurer RC GOP

Mailing Address 130 Camelot Road

City State Zip Code
Salisbury NC 28147-8931

Nature of Debt (Purpose):
dinner

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT5260**

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="5000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5000.00"/>