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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	A		uthorized Co	emmittee			Office Use Only
NAME OF COMMITTEE (in		TYPE OR PRINT		Example: If typin over the lines.	ıg, type	12FE4M5	
COMMITTEE	TO ELEC	TCLEARY	FOR CON	GRESS			
		PO BOX 28778					
ADDRESS (number ar	nd street)						
Check if dir than previo reported. (A	usly	RALEIGH				NC 2	27611
2. FEC IDENTIFIC	CATION NU	MBER ▼	CITY			STATE A	ZIP CODE
C C0055384	12		3. IS THIS REPORT	× NEW	OR	AMEND (A)	STATE ▼ DISTRICT NC 13
(a) Quarterly R	EPORT (Choose One) Reports: 15 Quarterly Report (Q1) 15 Quarterly Report (Q2)		(b) 12-Day PRE	Primary (12P	-Election Report for the: Primary (12P) Convention (12C)	General (12G) Special (12S)	
	r 15 Quarterly		Election	on	D D /	Y " Y " Y	in the State of
X January	/ 31 Year-End	Report (YE)	(c) 30-Day P (OST-Election Rep	oort for the	:	
				General (300	à)	Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election	on	D D /	Y Y Y Y	in the State of
5. Covering Period	M N 10	16 /	Y Y Y Y Y 2015	through	M N	31	2015
I certify that I have a Type or Print Name		Report and to	_	knowledge and	belief it is t	rue, correct and	complete.
Signature of Treasure		t Dixson		[Electronically	Filed]	Date 01	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	false, erroned	ous, or incomplet	te information ma	ay subject the per	rson signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

COMMITTEE TO ELECT CLEARY FOR CONGRESS

10 12 31 2015 16 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 77705.97 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 77705.97 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 171.75 72542.98 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 171.75 72542.98 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 9175.37 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5000.00 Schedule C and/or Schedule D).....

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)

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Write or Type Committee Name

COMMITTEE TO ELECT CLEARY FOR CONGRESS

Report Covering the Period: From: 10 16 2015 To: 12 31 2015

	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)	0.00	43726.47		
	(ii) Unitemized	0.00	24495.50		
	(iii) TOTAL of contributions from individuals	0.00	68221.97		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	4200.00		
	(d) The Candidate	0.00	5284.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	77705.97		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	10000.00		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	10000.00		
4.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	32.01		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	87737.98		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS			COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPI	ERATING EXPENDITURES	171.75	72542.98	
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00	
19.	LO	AN REPAYMENTS:			
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00	
	(b)	Of All Other Loans	0.00	0.00	
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00	
20.	REF	FUNDS OF CONTRIBUTIONS TO:			
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00	
			0.00	0.00	
	(b)	Political Party Committees 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.	ОТІ	HER DISBURSEMENTS	0.00	100.00	
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	171.75	72642.98	
		III. CASH SU	MMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			9347.12		
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			0.00		
25. SUBTOTAL (add Line 23 and Line 24)			9347.12		
26.	то	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	171.75	
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			9175.37		

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 5 6 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

Transaction ID: SB17.5523

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT CLEARY FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Bluehost Inc 2015 Mailing Address 560 Timpanogos Pkwy 30 City State Zip Code Amount of Each Disbursement this Period UT Orem 84097 Purpose of Disbursement 143.88 web computer expense 001 Transaction ID: SB17.5522 Candidate Name Category/ BRENDA LEWIS CLEARY Type Office Sought: House Disbursement For: Senate Primary General Other (specify) President NC State: District: Full Name (Last, First, Middle Initial) Bluehost Inc Date of Disbursement Mailing Address 560 Timpanogos Pkwy 12 01 2015 City State Zip Code Amount of Each Disbursement this Period UT 84097 Orem 27.87 Purpose of Disbursement computer web cost 001

State: NC	Senate President District: 13	Other (specify)	al	
Full Name (Last	, First, Middle Initial)			Date of Disbursement
City		State Zip Code		Amount of Each Disbursement this Period
Purpose of Disb	oursement			, ,
Candidate Name	Э		Category/ Type	
Office Sought: State:	House Senate President District:	Disbursement For: Primary General Other (specify)	ıl	
				171.75

Category/

Type

Candidate Name

Office Sought:

COMMITTEE TO ELECT CLEARY FOR CONGRESS

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

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

House

Disbursement For:

171.75

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

6

Transaction ID: SC/10.4442 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT CLEARY FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary COMMITTEE TO ELECT CLEARY FOR CONGRESS General Mailing Address Other (specify) \blacktriangledown PO BOX 28778 City State ZIP Code NC 27611 **RALEIGH** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 14 ^D ^м о⁻4^м ž014 0.00 12/31/2016 % (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 State ZIP Code 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)..... 5000.00 TOTALS This Period (last page in this line only) 5000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.