

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Old North State PAC

ADDRESS (number and street) PO Box 97275
Check if different than previously reported. (ACC) Raleigh NC 27624

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00633818 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2021 through [MM] / [DD] / [YYYY] 12 / 31 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
McMichael, Collin, , ,
Type or Print Name of Treasurer

Signature of Treasurer *McMichael, Collin, , ,* [Electronically Filed] Date 01 / 29 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Old North State PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		12358.25
(b) Cash on Hand at Beginning of Reporting Period.....	4438.51	
(c) Total Receipts (from Line 19)	42696.09	45796.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	47134.60	58154.34
7. Total Disbursements (from Line 31).....	19202.05	30221.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27932.55	27932.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Old North State PAC

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

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).....	0.00	0.00
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	50.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	50.00	50.00
12. Transfers From Affiliated/Other Party Committees.....	42646.09	42646.09
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	3100.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	42696.09	45796.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	42696.09	45796.09

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	702.05	1721.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	702.05	1721.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18500.00	28500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19202.05	30221.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19202.05	30221.79

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	50.00	50.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50.00	50.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	702.05	1721.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	702.05	1721.79

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Old North State PAC

A. Budd Victory

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 97275

City Raleigh	State NC	Zip Code 27624
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00638049

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9715.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2021

Transaction ID : SA12.4353

Amount of Each Receipt this Period
9715.76

Memo Item
JFC Transfer

B. Gross, Mark, J, ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9812 Macon Road

City Raleigh	State NC	Zip Code 27613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Oak Grove Technologies CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2021

Transaction ID : SA12.4353.0

Amount of Each Receipt this Period
5000.00

Memo Item
JFC Attribution

C. Purdy, Verl, D, ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4804 Pellyn Farm Court

City Charlotte	State NC	Zip Code 28226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Cadrillion Capital Investments

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2021

Transaction ID : SA12.4353.1

Amount of Each Receipt this Period
4200.00

Memo Item
JFC Attribution

SUBTOTAL of Receipts This Page (optional).....▶	9715.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Purdy, Sandra, Johnson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4804 Pellyn Farm Court
 City Charlotte State NC Zip Code 28226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 08 / 16 / 2021
Transaction ID : SA12.4353.2
 Amount of Each Receipt this Period 1700.00
 Memo Item
 JFC Attribution

B. Budd Victory
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 97275
 City Raleigh State NC Zip Code 27624
 FEC ID number of contributing federal political committee. **C** C00638049
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15371.13

Date of Receipt 09 / 30 / 2021
Transaction ID : SA12.4374
 Amount of Each Receipt this Period 5655.37
 Memo Item
 JFC Transfer

C. Koury, Bradford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 850
 City Burlington State NC Zip Code 27216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carolina Hosiery Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 09 / 20 / 2021
Transaction ID : SA12.4374.0
 Amount of Each Receipt this Period 2800.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	5655.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Childress, Judy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1189
 City Welcome State NY Zip Code 27374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Childress Racing Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2021
Transaction ID : SA12.4374.1
 Amount of Each Receipt this Period
 1700.00
 Memo Item
 JFC Attribution

B. Childress, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1189
 City Welcome State NC Zip Code 27374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Childress Racing Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2021
Transaction ID : SA12.4374.2
 Amount of Each Receipt this Period
 1700.00
 Memo Item
 JFC Attribution

C. Budd Victory
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 97275
 City Raleigh State NC Zip Code 27624
 FEC ID number of contributing federal political committee. **C** C00638049
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 42646.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2021
Transaction ID : SA12.4384
 Amount of Each Receipt this Period
 27274.96
 Memo Item
 JFC Transfer

SUBTOTAL of Receipts This Page (optional)..... ▶ 27274.96
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Albright, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8310 W Gulf Blvd
 City Treasure Island State FL Zip Code 33706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Integrity Marketing Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 20 / 2021
Transaction ID : SA12.4384.0
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

B. Tran, Zach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 Saddleworth Trail
 City Wilmington State NC Zip Code 28405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Diamondback Investment Group Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2021
Transaction ID : SA12.4384.1
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

C. Ramsey, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 Homestead Trace
 City Brevard State NC Zip Code 28712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ragnar Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 25 / 2021
Transaction ID : SA12.4384.2
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Ramsey, Jamie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 Homestead Trace
 City Brevard State NC Zip Code 28712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2021
Transaction ID : SA12.4384.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

B. Thomas, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 763 Comitech Dr
 City Pembroke State NC Zip Code 28372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Metcon Inc Occupation (for Individual) General Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 28 / 2021
Transaction ID : SA12.4384.4
 Amount of Each Receipt this Period 200.00
 Memo Item
 JFC Attribution

C. Stancil, Freddie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 466 Stancil Rd
 City Angier State NC Zip Code 27501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stancil Builders Occupation (for Individual) Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA12.4384.5
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Jones, Bobby, Ken, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6825 Hwy 70 E
 City Princeton State NC Zip Code 27569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Deacon Jones Auto Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 01 / 2021
Transaction ID : SA12.4384.6
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

B. Gursoy, Sinan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4841 Sycamore Dr
 City Naples State FL Zip Code 34118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 11 / 2021
Transaction ID : SA12.4384.7
 Amount of Each Receipt this Period 1500.00
 Memo Item
 JFC Attribution

C. Hathaway, William, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10780 E County Hwy 30 A
 City Inlet Beach State FL Zip Code 32461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hathaway Investment Properties Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 29 / 2021
Transaction ID : SA12.4384.8
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC Attribution

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Old North State PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hathaway, Sharon, L, ,

Mailing Address 10780 E County Hwy 30 A

City Inlet Beach State FL Zip Code 32461

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

Name of Employer (for Individual) Hathaway Investment Properties Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2021

Transaction ID : SA12.4384.9

Amount of Each Receipt this Period
5000.00

Memo Item
 JFC Attribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	42646.09

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Old North State PAC

Full Name (Last, First, Middle Initial) A. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4364 Amount of Each Disbursement this Period [] 251.30	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement PAC Accounting Services		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CM&Co, LLC		Date of Disbursement MM / DD / YYYY 12 / 10 / 2021	
Mailing Address PO Box 97275		FEC Identification Number C [] Transaction ID : SB21B.4419 Amount of Each Disbursement this Period [] 448.45	
City Raleigh	State NC	Zip Code 27624	Category/Type []
Purpose of Disbursement PAC Accounting Services		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/Type []
Purpose of Disbursement		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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	[] 699.75
TOTAL This Period (last page this line number only)..... ▶	[] 699.75

**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"/> 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)
Old North State PAC

Full Name (Last, First, Middle Initial) A. KRISTI FOR GOVERNOR		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address PO BOX 527		FEC Identification Number C Transaction ID : SB23.4362 Amount of Each Disbursement this Period 4000.00
City SIOUX FALLS	State SD	
Zip Code 57101	Purpose of Disbursement NON-FEDERAL CONTRIBUTION	Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MAGGIE'S LIST		Date of Disbursement MM / DD / YYYY 09 / 01 / 2021
Mailing Address 6675 WEEPING WILLOW WAY		FEC Identification Number C C00469023 Transaction ID : SB23.4360 Amount of Each Disbursement this Period 2500.00
City TALLAHASSEE	State FL	
Zip Code 32311	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS 2022		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address PO BOX 1863		FEC Identification Number C C00768705 Transaction ID : SB23.4408 Amount of Each Disbursement this Period 2900.00
City MARTINSBURG	State WV	
Zip Code 25402	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
Candidate Name MOONEY, ALEXANDER XAVIER, , ,	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 02		

SUBTOTAL of Disbursements This Page (optional).....▶	9400.00
TOTAL This Period (last page this line number only).....▶	

**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"/> 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)
Old North State PAC

A. MOONEY FOR CONGRESS 2022

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement Contribution

Candidate Name MOONEY, ALEXANDER XAVIER, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: WV District: 02

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2021

FEC Identification Number

C C00768705

Transaction ID : SB23.4411

Amount of Each Disbursement this Period

2100.00

Memo Item

B. POLIQUIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 524

City BANGOR State ME Zip Code 04402

Purpose of Disbursement Contribution

Candidate Name POLIQUIN, BRUCE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2021

FEC Identification Number

C C00518654

Transaction ID : SB23.4347

Amount of Each Disbursement this Period

2000.00

Memo Item

C. VAN TAYLOR CAMPAIGN

Full Name (Last, First, Middle Initial)

Mailing Address 1900 PRESTON ROAD #267 - PMB 229

City PLANO State TX Zip Code 75093

Purpose of Disbursement Contribution

Candidate Name TAYLOR, NICHOLAS V., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: TX District: 03

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2021

FEC Identification Number

C C00653634

Transaction ID : SB23.4414

Amount of Each Disbursement this Period

2900.00

Memo Item

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

7000.00

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

**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"/> 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)
Old North State PAC

Full Name (Last, First, Middle Initial)
A. VAN TAYLOR CAMPAIGN

Mailing Address 1900 PRESTON ROAD #267 - PMB 229

City PLANO State TX Zip Code 75093

Purpose of Disbursement
Contribution

Candidate Name
TAYLOR, NICHOLAS V., , ,

Office Sought: House Senate President
State: TX District: 03
Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 17 / 2021

FEC Identification Number

C C00653634

Transaction ID : SB23.4418

Amount of Each Disbursement this Period

2100.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2100.00

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

18500.00