

**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

Walker 4 NC

ADDRESS (number and street)

2941 Battleground Ave

Box 38334

Check if different
than previously
reported. (ACC)

Greensboro

NC

27438

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00543231

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NC

06

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

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

11

Y Y Y Y

2012

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2013

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 Charles Rakestraw

Signature of Treasurer

Charles Rakestraw

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2013

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 14

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

	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))....	20762.90	19309.77
(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))	20762.90	19309.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4562.90	3109.77
(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))	4562.90	3109.77
8. Cash on Hand at Close of Reporting Period (from Line 27).....	16200.00	
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	

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)

PAGE 3 / 14

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

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).....

16200.00

16200.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

16200.00

16200.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

4562.90

3109.77

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

20762.90

19309.77

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

20762.90

19309.77

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4562.90	3109.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN 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. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4562.90	3109.77

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20762.90
25. SUBTOTAL (add Line 23 and Line 24).....	20762.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4562.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	16200.00

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

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

FOR LINE NUMBER: PAGE 5 OF 14
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 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)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Dwight D Bates		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2013	
Mailing Address 405 Quicksilver Ct		Transaction ID : SA11AI.4120	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Greensboro Ear Nose and Throat	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Mark Bissette		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2013	
Mailing Address 6091 Grinsted Ct		Transaction ID : SA11AI.4114	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 1300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lorillard	Occupation VP		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		
C. Full Name (Last, First, Middle Initial) Douglas A Blackman		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2013	
Mailing Address 7088 Toscana Trce		Transaction ID : SA11AI.4110	
City Summerfield	State NC	Zip Code 27358	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Central Carolina Surgery	Occupation Surgeon		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		2800.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 6 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Louise H Graham

Mailing Address 3980 Bittle Rd

City

Gibsonville,

State

NC

Zip Code

27249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2013

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Mark A Lyerly

Mailing Address 6311 Linda Dr

City

Lewisville

State

NC

Zip Code

27023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Neurological Surgery and Pain

Occupation

Neurosurgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2013

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Patrick Mattingly

Mailing Address 180 Arnold Palmer Dr

City

Advance

State

NC

Zip Code

27006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2013

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period

1000.00

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

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

6200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Richard Nester**A.**

Mailing Address 5807 Stanley Huff Rd

City

Summer Field

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tri-City Mechanical Contractor

Occupation

President

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		29		2013

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Charles Rakestraw**B.**Mailing Address 2941 Battleground
Box 38334

City

Greensboro

State

NC

Zip Code

27438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Broker

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2013

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Deborah H Ratliff**C.**

Mailing Address 90 Heron's Bill Dr

City

Bluffton

State

SC

Zip Code

29909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2013

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period

1000.00

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

6200.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Matthew K Tsuei

Mailing Address 18 Winterberry Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Carolina Surgery

Occupation

Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2013

Transaction ID : SA11Al.4118

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. 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 M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. 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 M	/	D 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

16200.00

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)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2012	
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4139	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 1453.13 In-kind - Testing the Waters Expenses, Food/Beverage, Site Fee
FEC ID number of contributing federal political committee. C H4NC06052			
Name of Employer Lawndale Baptist Church	Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1453.13		
B. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2013	
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4140	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 19.05 In-kind - Testing the Waters Expenses, Food/Beverage
FEC ID number of contributing federal political committee. C H4NC06052			
Name of Employer Lawndale Baptist Church	Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1472.18		
C. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2013	
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4141	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 26.00 In-kind - Testing the Waters Expenses, Food/Beverage
FEC ID number of contributing federal political committee. C H4NC06052			
Name of Employer Lawndale Baptist Church	Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1498.18		
SUBTOTAL of Receipts This Page (optional).....		1498.18	
TOTAL This Period (last page this line number only).....		1498.18	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		06		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
03		06		2013									
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4142											
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period <table border="1"> <tr> <td>14.39</td> </tr> </table>	14.39									
14.39													
FEC ID number of contributing federal political committee. C H4NC06052		In-kind - Testing the Waters Expenses, Food/Beverage											
Name of Employer Lawndale Baptist Church	Occupation Minister												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1512.57</td> </tr> </table>			1512.57									
1512.57													

B. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>12</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		12		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
03		12		2013									
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4143											
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period <table border="1"> <tr> <td>29.00</td> </tr> </table>	29.00									
29.00													
FEC ID number of contributing federal political committee. C H4NC06052		In-kind - Testing the Waters Expenses, Food/Beverage											
Name of Employer Lawndale Baptist Church	Occupation Minister												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1564.90</td> </tr> </table>			1564.90									
1564.90													

C. Full Name (Last, First, Middle Initial) Bradley Mark Walker		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>12</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		12		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
03		12		2013									
Mailing Address 3315 Van Allen Ct		Transaction ID : SA11D.4144											
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period <table border="1"> <tr> <td>23.33</td> </tr> </table>	23.33									
23.33													
FEC ID number of contributing federal political committee. C H4NC06052		In-kind - Testing the Waters Expenses, Food/Beverage											
Name of Employer Lawndale Baptist Church	Occupation Minister												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1535.90</td> </tr> </table>			1535.90									
1535.90													

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>66.72</td> </tr> </table>	66.72
66.72		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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 11 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

<p>A. Full Name (Last, First, Middle Initial) Bradley Mark Walker</p> <p>Mailing Address 3315 Van Allen Ct</p> <p>City Greensboro State NC Zip Code 27410</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/> H4NC06052</p> <p>Name of Employer Lawndale Baptist Church Occupation Minister</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <input type="text" value="4562.90"/></p>		<p>Date of Receipt <input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2013"/></p> <p>Transaction ID : SA11D.4145</p> <p>Amount of Each Receipt this Period <input type="text" value="2998.00"/></p> <p>In-kind - Website Development</p>
<p>B. Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <input type="text"/></p>		<p>Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount of Each Receipt this Period <input type="text"/></p>
<p>C. Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <input type="text"/></p>		<p>Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount of Each Receipt this Period <input type="text"/></p>
<p>SUBTOTAL of Receipts This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>		<p><input type="text" value="2998.00"/></p> <p><input type="text" value="4562.90"/></p>

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 14

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage, Site Fee

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2012

Amount of Each Disbursement this Period

1453.13

Transaction ID : SB17.4152

B. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2013

Amount of Each Disbursement this Period

19.05

Transaction ID : SB17.4151

C. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2013

Amount of Each Disbursement this Period

26.00

Transaction ID : SB17.4150

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

1498.18

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

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

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2013

Amount of Each Disbursement this Period

14.39

Transaction ID : SB17.4149

B. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2013

Amount of Each Disbursement this Period

23.33

Transaction ID : SB17.4147

c. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Testing the Waters Expenses, Food/Beverage

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2013

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.4148

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

66.72

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 14

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City Greensboro State NC Zip Code 27410

Purpose of Disbursement
In-kind - Website Development

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 06

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
03 / 18 / 2013

Amount of Each Disbursement this Period

2998.00

Transaction ID : SB17.4146

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

2998.00

4562.90