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# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT**  Example: If typing, type over the lines

**12FE4N5**

North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.

ADDRESS (number and street) **5301 Glenwood Avenue**

Check if different than previously reported. (ACC)

**Raleigh, N.C. 27612**

2. FEC IDENTIFICATION NUMBER **C 00216754**

CITY **RALEIGH** STATE **NC** ZIP CODE **27612**

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **04 01 2002** through **06 30 2002**

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 **R. Julian Philipott, Jr.**

Signature of Treasurer  Date **07 15 2002**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 10/1)

Page 2

Write or Type Committee Name **North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.**

Report Covering the Period: From: **04 01 2002** To: **06 30 2002**

	COLUMN A Time Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2002</b>	<b>2002</b>	<b>1823430</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>1495873</b>	
(c) Total Receipts (from Line 19)	<b>2645</b>	<b>7934</b>
(d) Subtotal (and Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<b>1498518</b>	<b>1831364</b>
7. Total Disbursements (from Line 30)	<b>260000</b>	<b>592845</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>1238518</b>	<b>1238518</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<b>000</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<b>000</b>	

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

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name **North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.**

Report Covering the Period: From:

04 01 2002

To:

06 30 2002

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) .....		
(ii) Unitemized .....		
(ii) TOTAL (add Lines 11(a)(i) and (ii)) .....	0 0 0	2 0 0 0
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	0 0 0	2 0 0 0
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2 6 4 5	5 9 3 4
18. Transfers from Nonfederal Account for Joint Activity .....	0 0 0	0 0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	2 6 4 5	7 9 3 4
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	2 6 4 5	7 9 3 4

DETAILED SUMMARY PAGE  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliates/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,050,000	5,300,000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	550,000	6,284,600
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	2,600,000	5,928,460
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	2,500,000	5,928,460
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	000	2,000,000
33. Total Contribution Refunds (from Line 28(d))	000	000
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	000	2,000,000
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

**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 1 OF 1	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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): **North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.**

**A. BB&T**

Full Name (Last, First, Middle Initial): \_\_\_\_\_

Mailing Address: **P.O. Box 27961**

City: **Raleigh** State: **NC** Zip Code: **27612**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  Primary  General  Other (specify) **Interest on checking**

Aggregate Year-to-Date: **5934**

Date of Receipt: **06 30 2002**

Amount of Each Receipt this Period: **2645**

**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) \_\_\_\_\_

Aggregate Year-to-Date: \_\_\_\_\_

Date of Receipt: \_\_\_\_\_

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) \_\_\_\_\_

Aggregate Year-to-Date: \_\_\_\_\_

Date of Receipt: \_\_\_\_\_

Amount of Each Receipt this Period: \_\_\_\_\_

**SUBTOTAL of Receipts This Page (optional):** \_\_\_\_\_

**TOTAL This Period (last page this line number only):** **2645**

**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)				PAGE 1 OF 1	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28
<input type="checkbox"/> 28a	<input type="checkbox"/> 27	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29			

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NAME OF COMMITTEE (in full) **North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.**

Full Name (Last, First, Middle Initial) **A. Bob Etheridge For Congress**

Date of Disbursement: 04/19/2002

Mailing Address: **607 N. First Street**

City: **Lillington** State: **NC** Zip Code: **27546**

Purpose of Disbursement: **Contribution YTD \$1,000.00** Category/Type: **0 1 1**

Candidate Name: **Bob Etheridge**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **NC** District: **2**

Amount of Each Disbursement this Period: **1 0 0 0 0 0**

Full Name (Last, First, Middle Initial) **B. Frank Ballance, Jr. For Congress**

Date of Disbursement: 04/22/2002

Mailing Address: **P.O. Box 616**

City: **Warrenton** State: **NC** Zip Code: **27589**

Purpose of Disbursement: **Contribution YTD \$50.00** Category/Type: **0 1 1**

Candidate Name: **Frank Ballance, Jr.**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **NC** District: **1**

Amount of Each Disbursement this Period: **5 0 0 0**

Full Name (Last, First, Middle Initial) **C. Dole North Carolina Victory Committee**

Date of Disbursement: 06/28/2002

Mailing Address: **P.O. Box 2109**

City: **Salisbury** State: **NC** Zip Code: **28145**

Purpose of Disbursement: **Contribution YTD \$1,000.00** Category/Type: **0 1 1**

Candidate Name: **Elizabeth Dole**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **NC** District:

Amount of Each Disbursement this Period: **2 0 0 0 0 0**

SUBTOTAL of Disbursements This Page (optional) **2 0 5 0 0 0**

TOTAL This Period (last page this line number only) **2 0 5 0 0 0**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBERS: (check only one)					PAGE 1 OF 1			
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (in Full) **North Carolina Farm Bureau Federation, Inc.  
Political Action Committee, Inc.**

**A.**

Full Name (Last, First, Middle Initial) **KPMG LLP**

Mailing Address **P.O. Box 120001**

City **Dallas** State **TX** Zip Code **75312**

Purpose of Disbursement **Audit Expense**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **Audit**

State: District:

Date of Disbursement **06/07/2002**

Amount of Each Disbursement this Period **5500.00**

Category/Type **001**

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) **5500.00**

**TOTAL** This Period (last page this line number only) **5500.00**

Federal Election Commission

## ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jan</i> PREPARER	<i>7-20-07</i> DATE PREPARED

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