

**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

North Carolina Medical Society Federal Political Education and Action Committee

ADDRESS (number and street)

PO Box 25834

222 N. Person Street

Check if different than previously reported. (ACC)

Raleigh

NC

27611

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00003152

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Quarterly 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

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

07

01

2004

through

09

30

2004

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 Asst Treasurer Stephen W. Keene

Signature of Treasurer Electronically Filed by Asst Treasurer Stephen W. Keene

Date 10 14 2004

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 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

Report Covering the Period: From: ^M07 ^D01 ^Y2004 To: ^M09 ^D30 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^M ^D		70978.69
(b) Cash on Hand at Beginning of Reporting Period	113021.57	
(c) Total Receipts (from Line 19)	21083.16	82256.04
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	134104.73	153234.73
<hr/>		
7. Total Disbursements (from Line 31)	81800.00	100930.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52304.73	52304.73
<hr/>		
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

North Carolina Medical Society Federal Political Education and Action Committee

Report Covering the Period: From: ^M07 ⁻01 ⁻2004 To: ^M09 ⁻30 ⁻2004

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)	5500.00	
(ii) Unitemized	15435.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	20935.00	78928.00
(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)	20935.00	78928.00
12. Transfers From Affiliated/Other Party Committees	10.00	2968.40
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	138.16	359.64
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 Transfer (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))	21083.16	82256.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21083.16	82256.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	122.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	122.00
22. Transfers to Affiliated/Other Party Committees.....	7600.00	26800.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	74000.00	74008.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared 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 ActMty (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))..	81800.00	100930.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	81800.00	100930.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	20935.00	78928.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20935.00	78928.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	122.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	122.00

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

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

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Jerry L. Barron		Date of Receipt M / D / Y 08 / 03 / 2004
Mailing Address 2826 Randolph Road		Transaction ID: SA11A1.8290
City Charlotte	State NC	Zip Code 28211-1019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Perry & Barron Orthopaedics & Sports M Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Michael John Barless		Date of Receipt M / D / Y 08 / 02 / 2004
Mailing Address 5A Regional Circle		Transaction ID: SA11A1.8467
City Pinehurst	State NC	Zip Code 28374
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Family Eye Care of the Carolinas Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Michael Robert Bohnesek		Date of Receipt M / D / Y 08 / 27 / 2004
Mailing Address PO Box 2119		Transaction ID: SA11A1.8603
City Albemarle	State NC	Zip Code 28002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Albemarle Anesthesiology, PA Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 28

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Clifford Kay Callaway		Date of Receipt M / D / Y 08 / 09 / 2004	
Mailing Address PD Box 867967		Transaction ID: SA11A1.8299	
City Charlotte	State NC	Zip Code 28266	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Callaway Associates, LLP dba ProMed Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) B. Dr. Nizan Daniel Datz		Date of Receipt M / D / Y 07 / 07 / 2004	
Mailing Address PD Box 571		Transaction ID: SA11A1.8103	
City Smithfield	State NC	Zip Code 27577	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Eastern Carolina Ear, Nose & Throat As Receipt For: 2004 X Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) C. Dr. Ralph S. Christy		Date of Receipt M / D / Y 09 / 21 / 2004	
Mailing Address 200 Medical Park Drive Suite 230		Transaction ID: SA11A1.8588	
City Concord	State NC	Zip Code 28025	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Northeast Cardiovascular	Occupation Physician Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 28

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. Jamie Garrett		Date of Receipt M / D / Y 07 / 06 / 2004	
Mailing Address 105 Sea Bury Court		Transaction ID: SA11A1.8128	
City Emerald Isle	State NC	Zip Code 28584-2303	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Onslow MC	Occupation Bookkeeper		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) B. Dr. Neil Bostrum Griffin		Date of Receipt M / D / Y 07 / 08 / 2004	
Mailing Address 217D Midland Road		Transaction ID: SA11A1.8132	
City Southern Pines	State NC	Zip Code 28387	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Carolina Eye Associates. PA -Southern	Occupation Physician		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) C. Dr. Robert S. Hawks		Date of Receipt M / D / Y 07 / 16 / 2004	
Mailing Address 171B East 4th Street Suite 5D1		Transaction ID: SA11A1.8241	
City Charlotte	State NC	Zip Code 28204	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mid Carolina Cardiology	Occupation Physician		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 28

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Thomas Courteney Leiner		Date of Receipt M / D / Y 08 / 02 / 2004
Mailing Address 142B-A Ellen Street		Transaction ID: SA11A1.8481
City Monroe	State NC	Zip Code 28112-5173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Leiner Urology, PA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Philip Hayes Nawell		Date of Receipt M / D / Y 07 / 02 / 2004
Mailing Address 4301 Lake Boone Trail Suite 300		Transaction ID: SA11A1.8485
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wake Urological Associates	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Fernando R. Puente		Date of Receipt M / D / Y 08 / 18 / 2004
Mailing Address 800 Springfield Commons Drive Suite 115		Transaction ID: SA11A1.8441
City Raleigh	State NC	Zip Code 27609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Raleigh Dermatology Associates, PA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 28

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Richard Bemano Reiling		Date of Receipt M / D / Y 09 / 24 / 2004
Mailing Address 200 Hawthorne Lane		Transaction ID: SA11A1.8600
City Charlotte	State NC	Zip Code 28233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Presbyterian Cancer Center	Occupation Physician	Aggregate Year-to-Date ▼ 270.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Frank Conrad Schwalbe		Date of Receipt M / D / Y 08 / 30 / 2004
Mailing Address 820 Church Street North		Transaction ID: SA11A1.8444
City Concord	State NC	Zip Code 28027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northeast Anesthesia & Pa- in Specialist	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Stuart Morris Squires		Date of Receipt M / D / Y 07 / 06 / 2004
Mailing Address 2525 Raeford Road Suite B PO Box 53844		Transaction ID: SA11A1.8192
City Fayetteville	State NC	Zip Code 28305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cumberland Anesthesia Ass- ociates, PA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 X Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Robert Cooper Terry		Date of Receipt M / D / Y 08 / 18 / 2004
Mailing Address PD Box 510 Tryon Road		Transaction ID: SA11A1.8450
City Rutherfordton	State NC	Zip Code 28139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Rutherford Surgical Associates, PA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Scott L. Tucker		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 1345-A Westgate Center Drive		Transaction ID: SA11A1.8578
City Winston-Salem	State NC	Zip Code 27103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Salem Plastic Surgery, Inc.	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Joseph John Ursh		Date of Receipt M / D / Y 07 / 19 / 2004
Mailing Address 935 W/ylke Road		Transaction ID: SA11A1.8280
City Shelby	State NC	Zip Code 28150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Dermatology Center of Shelby, PA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 28
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input 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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Charles Edward Williams		Date of Receipt M / D / Y 08 / 10 / 2004
Mailing Address 410 Canterbury Road		Transaction ID: SA11A1.8498
City Smithfield	State NC	Zip Code 27577
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Horizon Family Medicine, PA	Occupation Physician	
Receipt For: 2004 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	5500.00

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

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

FOR LINE NUMBER: PAGE 13 / 28

(check only one)

<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)
North Carolina Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. American Medical Political Action Committee		Date of Receipt M / D / Y 08 / 25 / 2004
Mailing Address 1101 Vermont Avenue, NW		Transaction ID: SA12.8975
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer	Occupation	Transfer for Graham Lyles
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2068.40	

SUBTOTAL of Receipts This Page (optional)	▶	10.00
TOTAL This Period (last page this line number only)	▶	10.00

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

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

FOR LINE NUMBER: PAGE 14 / 28

(check only one)

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

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Wachovia Bank		Date of Receipt M / D / Y 07 / 31 / 2004
Mailing Address PD Box 563966		Transaction ID: SA17.8208
City Raleigh	State NC	Zip Code 28262
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.82
Name of Employer	Occupation	Interest earned in July
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 272.30	

Full Name (Last, First, Middle Initial) B. Wachovia Bank		Date of Receipt M / D / Y 08 / 31 / 2004
Mailing Address PD Box 563966		Transaction ID: SA17.8500
City Raleigh	State NC	Zip Code 28262
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.65
Name of Employer	Occupation	Interest earned in August
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 328.95	

Full Name (Last, First, Middle Initial) C. Wachovia Bank		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address PD Box 563966		Transaction ID: SA17.8816
City Raleigh	State NC	Zip Code 28262
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.69
Name of Employer	Occupation	Interest earned in September
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 359.64	

SUBTOTAL of Receipts This Page (optional)	▶	138.16
TOTAL This Period (last page this line number only)	▶	138.16

**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 15 / 28

<input type="checkbox"/> 21b	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. American Medical Political Action Committee		Transaction ID: SB22.8207
Mailing Address 1101 Vermont Avenue, NW		Date of Disbursement 07 / 22 / 2004
City Washington	State DC	Amount of Each Disbursement this Period
Zip Code 20005		2500.00
Purpose of Disbursement Voluntary contributions 7/1/04-7/15/04		Category/ Type
Candidate Name		
Office Sought: House	Disbursement For: Primary	
Senate	General	
President	Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) B. American Medical Political Action Committee		Transaction ID: SB22.8282
Mailing Address 1101 Vermont Avenue, NW		Date of Disbursement 08 / 19 / 2004
City Washington	State DC	Amount of Each Disbursement this Period
Zip Code 20005		1250.00
Purpose of Disbursement Transfer 7/16/04-7/31/04		Category/ Type
Candidate Name		
Office Sought: House	Disbursement For: Primary	
Senate	General	
President	Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) C. American Medical Political Action Committee		Transaction ID: SB22.8376
Mailing Address 1101 Vermont Avenue, NW		Date of Disbursement 08 / 25 / 2004
City Washington	State DC	Amount of Each Disbursement this Period
Zip Code 20005		1450.00
Purpose of Disbursement Transfer 8/1/04-8/15/04		Category/ Type
Candidate Name		
Office Sought: House	Disbursement For: Primary	
Senate	General	
President	Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional) ► **5200.00**

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)

PAGE 16 / 28

<input type="checkbox"/> 21b	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. American Medical Political Action Committee		Transaction ID: SB22.8461 Date of Disbursement 09 / 09 / 2004	
Mailing Address 1101 Vermont Avenue, NW		Amount of Each Disbursement this Period 1350.00	
City Washington State DC Zip Code 20005	Purpose of Disbursement Contributions 8/16/04-8/31/04	Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. American Medical Political Action Committee		Transaction ID: SB22.8499 Date of Disbursement 09 / 22 / 2004	
Mailing Address 1101 Vermont Avenue, NW		Amount of Each Disbursement this Period 500.00	
City Washington State DC Zip Code 20005	Purpose of Disbursement Contributions 9/1/04-9/15/04	Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. American Medical Political Action Committee		Transaction ID: SB22.8615 Date of Disbursement 09 / 30 / 2004	
Mailing Address 1101 Vermont Avenue, NW		Amount of Each Disbursement this Period 750.00	
City Washington State DC Zip Code 20005	Purpose of Disbursement Contributions 9/18/04-9/30/04	Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	2600.00
TOTAL This Period (last page this line number only)	7800.00

**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 17 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)
A. Charles Albertson

Mailing Address 136 Henry Dunn Pickett Road

City Beulaville State NC Zip Code 28518

Purpose of Disbursement
NC Senate District 10

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8540
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

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

Mailing Address 515 6th Street, NW

City Hickory State NC Zip Code 28601

Purpose of Disbursement
NC Senate District 42

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8541
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

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

Mailing Address 114 South Drive

City Hendersonville State NC Zip Code 28739

Purpose of Disbursement
NC Senate District 48

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8542
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **5000.00**

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)

PAGE 18 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)
A. Robert Atwater

Mailing Address PO Box 1703

City Pittsboro State NC Zip Code 27312

Purpose of Disbursement
NC Senate District 18

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8544
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

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

Mailing Address 381 Mother Vineyard Road

City Mantoo State NC Zip Code 27654

Purpose of Disbursement
NC Senate District 1

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8545
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
4000.00

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

Mailing Address 311 Pinewood Place

City Eden State NC Zip Code 27288

Purpose of Disbursement
NC Senate District 26

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8538
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **6000.00**

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)

PAGE 19 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Harris Blake		Transaction ID: SB29.8547 Date of Disbursement 09 / 15 / 2004	
Mailing Address PO Box 4266		Amount of Each Disbursement this Period 1000.00	
City Pinehurst State NC Zip Code 28374	Purpose of Disbursement NC Senate District 22 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrew Brock		Transaction ID: SB29.8548 Date of Disbursement 09 / 15 / 2004	
Mailing Address 2207 Farmington Road		Amount of Each Disbursement this Period 1000.00	
City Mocksville State NC Zip Code 27028	Purpose of Disbursement NC Senate District 34 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Harry Brown		Transaction ID: SB29.8549 Date of Disbursement 09 / 15 / 2004	
Mailing Address 808 Greenway Drive		Amount of Each Disbursement this Period 1000.00	
City Jacksonville State NC Zip Code 28548	Purpose of Disbursement NC Senate District 6 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

PAGE 20 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Robert Carpenter		Transaction ID: SB29.8550 Date of Disbursement 09 / 15 / 2004	
Mailing Address 29 Admiral Drive		Amount of Each Disbursement this Period 1000.00	
City Franklin State NC Zip Code 28734	Purpose of Disbursement NC Senate District 50 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Charlie Dannelly		Transaction ID: SB29.8551 Date of Disbursement 09 / 15 / 2004	
Mailing Address 3167 Dawnshire Avenue		Amount of Each Disbursement this Period 1000.00	
City Charlotte State NC Zip Code 28216	Purpose of Disbursement NC Senate District 38 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Don East		Transaction ID: SB29.8552 Date of Disbursement 09 / 15 / 2004	
Mailing Address 871 Longhill Road		Amount of Each Disbursement this Period 1000.00	
City Pilot Mountain State NC Zip Code 27041	Purpose of Disbursement NC Senate District 30 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

PAGE 21 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Dr. James Summers Forrester		Transaction ID: SB29.8553 Date of Disbursement 09 / 15 / 2004	
Mailing Address PO Box 459		Amount of Each Disbursement this Period 4000.00	
City Stanley State NC Zip Code 28104-0459	Purpose of Disbursement NC Senate District 41 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Linda Garrou		Transaction ID: SB29.8554 Date of Disbursement 09 / 15 / 2004	
Mailing Address 3910 Camerille Farm Road		Amount of Each Disbursement this Period 2000.00	
City Winston-Salem State NC Zip Code 27106	Purpose of Disbursement NC Senate District 32 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Garwood		Transaction ID: SB29.8555 Date of Disbursement 09 / 15 / 2004	
Mailing Address 453 Mark Lane		Amount of Each Disbursement this Period 2000.00	
City N. Wilkesboro State NC Zip Code 28659	Purpose of Disbursement NC Senate District 45 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
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)

PAGE 22 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Eddie Goodall		Transaction ID: SB29.8556	
Mailing Address 2132 Greenbrook Pkwy		Date of Disbursement 09 / 15 / 2004	
City Weddington	State NC	Zip Code 28104	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement NC Senate District 35		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Malcolm Graham		Transaction ID: SB29.8557	
Mailing Address 3167 Dawnshire Avenue		Date of Disbursement 09 / 15 / 2004	
City Charlotte	State NC	Zip Code 28216	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement NC Senate District 40		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Kay Hagan		Transaction ID: SB29.8558	
Mailing Address 305 Meadowbrook Terrace		Date of Disbursement 09 / 15 / 2004	
City Greensboro	State NC	Zip Code 27408	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement NC Senate District 27		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)

PAGE 23 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Fletcher Hartsell			Transaction ID: SB29.8559 Date of Disbursement 09 / 15 / 2004		
Mailing Address 129 Overbrook Drive, NE			Amount of Each Disbursement this Period 4000.00		
City Concord	State NC	Zip Code 28025	Category/ Type		
Purpose of Disbursement NC Senate District 36					
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼				
State: District					

Full Name (Last, First, Middle Initial) B. Hamilton Horton			Transaction ID: SB29.8580 Date of Disbursement 09 / 15 / 2004		
Mailing Address 860 Englewood Drive			Amount of Each Disbursement this Period 1000.00		
City Winston-Salem	State NC	Zip Code 27106	Category/ Type		
Purpose of Disbursement NC Senate District 31					
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼				
State: District					

Full Name (Last, First, Middle Initial) C. David Hoyle			Transaction ID: SB29.8581 Date of Disbursement 09 / 15 / 2004		
Mailing Address 804 Queens Drive			Amount of Each Disbursement this Period 4000.00		
City Dallas	State NC	Zip Code 28034	Category/ Type		
Purpose of Disbursement NC Senate District 43					
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼				
State: District					

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
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)

PAGE 24 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)
A. Neal Hunt

Mailing Address 2608 Sherborne Place

City Raleigh State NC Zip Code 27612

Purpose of Disbursement
NC Senate District 15

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8562
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

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

Mailing Address 3690 Miller Bridge Road

City Connolly Springs State NC Zip Code 28612

Purpose of Disbursement
NC Senate District 44

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8563
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

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

Mailing Address PO Box 310

City Tarboro State NC Zip Code 27886

Purpose of Disbursement
NC Senate District 3

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB29.8564
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **5000.00**

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)

PAGE 25 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. John Kerr		Transaction ID: SB29.8565 Date of Disbursement 09 / 15 / 2004	
Mailing Address 232 Ridgewood Drive		Amount of Each Disbursement this Period 2000.00	
City Goldsboro State NC Zip Code 27534	Category/ Type		
Purpose of Disbursement NC Senate District 5 Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeanne Lucas		Transaction ID: SB29.8566 Date of Disbursement 09 / 15 / 2004	
Mailing Address PO Box 3366		Amount of Each Disbursement this Period 1000.00	
City Durham State NC Zip Code 27702	Category/ Type		
Purpose of Disbursement NC Senate District 20 Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vernon Malone		Transaction ID: SB29.8567 Date of Disbursement 09 / 15 / 2004	
Mailing Address 2124 Lyndhurst Drive		Amount of Each Disbursement this Period 1000.00	
City Raleigh State NC Zip Code 27610	Category/ Type		
Purpose of Disbursement NC Senate District 14 Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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)

PAGE 26 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Martin Nesbitt		Transaction ID: SB29.8568	
Mailing Address 180 Robinhood Road, Apt. 3		Date of Disbursement 09 / 15 / 2004	
City Asheville	State NC	Zip Code 28804	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement NC Senate District 49		Candidate Name	Category/ Type
Office Sought: House Senate President			
Disbursement For: 2004 Primary X General Other (specify) ▼		State: District	

Full Name (Last, First, Middle Initial) B. Dr. William Robert Purcell		Transaction ID: SB29.8569	
Mailing Address 1301 Dunbar Drive		Date of Disbursement 09 / 15 / 2004	
City Laurinburg	State NC	Zip Code 28352	Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement NC Senate District 25		Candidate Name	Category/ Type
Office Sought: House Senate President			
Disbursement For: 2004 Primary X General Other (specify) ▼		State: District	

Full Name (Last, First, Middle Initial) C. Tony Rand		Transaction ID: SB29.8570	
Mailing Address 121 Great Oaks		Date of Disbursement 09 / 15 / 2004	
City Fayetteville	State NC	Zip Code 28303	Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement NC Senate District 19		Candidate Name	Category/ Type
Office Sought: House Senate President			
Disbursement For: 2004 Primary X General Other (specify) ▼		State: District	

SUBTOTAL of Disbursements This Page (optional)	10000.00
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)

PAGE 27 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial)
A. Fred Smith

Mailing Address 311 Athletic Club Blvd

City Clayton State NC Zip Code 27520

Purpose of Disbursement
NC Senate District 12

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8571
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
4000.00

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

Mailing Address 132 Lochwood West Drive

City Cary State NC Zip Code 27511

Purpose of Disbursement
NC Senate District 17

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8572
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
4000.00

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

Mailing Address 700 Birchwood Drive

City Nashville State NC Zip Code 27858

Purpose of Disbursement
NC Senate District 11

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB29.8573
Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional) ► **10000.00**

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)

PAGE 28 / 28

<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	<input type="checkbox"/> 30b

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 Medical Society Federal Political Education and Action Committee

Full Name (Last, First, Middle Initial) A. Chuck Tyson		Transaction ID: SB29.8574 Date of Disbursement 09 / 15 / 2004	
Mailing Address 4507 W Fairway Drive		Amount of Each Disbursement this Period 4000.00	
City New Bern State NC Zip Code 28502	Purpose of Disbursement NC Senate District 2 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David Weinstein		Transaction ID: SB29.8575 Date of Disbursement 09 / 15 / 2004	
Mailing Address 204 Walnut Cove Drive		Amount of Each Disbursement this Period 1000.00	
City Lumberton State NC Zip Code 28358	Purpose of Disbursement NC Senate District 13 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Woody White		Transaction ID: SB29.8576 Date of Disbursement 09 / 15 / 2004	
Mailing Address 6108 Old Branch Road		Amount of Each Disbursement this Period 2000.00	
City Wilmington State NC Zip Code 28409	Purpose of Disbursement NC Senate District 9 Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	74000.00