

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **3200 TRULIANT WAY**
 Check if different than previously reported. (ACC) **WINSTON SALEM NC 27103**

2. **FEC IDENTIFICATION NUMBER** **C** C00326132
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / 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 / 2019 through 09 / 30 / 2019

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 **JOHNSON, LINELL, , ,**

Signature of Treasurer **JOHNSON, LINELL, , ,** [Electronically Filed] Date 10 / 16 / 2019

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TRULIANT FCU PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		<input type="text" value="21562.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26294.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1665.40"/>	<input type="text" value="6397.24"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="27959.71"/>	<input type="text" value="27959.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6300.00"/>	<input type="text" value="6300.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21659.71"/>	<input type="text" value="21659.71"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
TRULIANT FCU PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	400.00	1790.00
(ii) Unitemized	1259.27	4589.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1659.27	6379.55
(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)	1659.27	6379.55
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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.).....	6.13	17.69
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1665.40	6397.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1665.40	6397.24

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6300.00	6300.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6300.00	6300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6300.00	6300.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1659.27	6379.55
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1659.27	6379.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<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)
TRULIANT FCU PAC

A. FRYE, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8411 CHARTWELL DRIVE
 City OAKRIDGE State NC Zip Code 27310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRULIANT FEDERAL CU Occupation (for Individual) VP FACILITIES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11AI.4395
 Amount of Each Receipt this Period 90.00
 Memo Item
 Donation

B. KIELBASA, RIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 IVORHING CT
 City KERNERSVILLE State NC Zip Code 27284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRULIANT FEDERAL CU Occupation (for Individual) CHIEF DIGITAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11AI.4398
 Amount of Each Receipt this Period 150.00
 Memo Item
 Donation

C. MCFARLAND, ROBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1119 NC HWY 150 W
 City SUMMERFIELD State NC Zip Code 27358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRULIANT FEDERAL CU Occupation (for Individual) VP BUSINESS SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 31 / 2019
Transaction ID : SA11AI.4399
 Amount of Each Receipt this Period 40.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MURRAY, CHRISTOPHER, , ,

Mailing Address 3209 TIMBEROAK CT

City GREENSBORO	State NC	Zip Code 27410
--------------------	-------------	-------------------

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

Name of Employer (for Individual) TRULIANT FEDERAL CU	Occupation (for Individual) VP MEMBER EXPERIENCE MFC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2019

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period
120.00

Memo Item
Donation

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	400.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

A. ADAMS, ALMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 31473

City CHARLOTTE State NC Zip Code 28231

Purpose of Disbursement Alma Adams for Congress

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NC District: 12

Date of Disbursement: 07 / 25 / 2019

FEC Identification Number: C H4NC12100

Transaction ID : SB23.4443

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Ajmera, Dimple, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6528 Matlea Court

City Charlotte State NC Zip Code 28215

Purpose of Disbursement Committee to Elect Dimple Ajmera

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 25 / 2019

FEC Identification Number: C

Transaction ID : SB23.4450

Amount of Each Disbursement this Period: 200.00

Memo Item

C. BISHOP, DAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2216 WHILDEN CT

City CHARLOTTE State NC Zip Code 28211

Purpose of Disbursement Bishop for Congress

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NC District: 09

Date of Disbursement: 07 / 25 / 2019

FEC Identification Number: C H0NC09187

Transaction ID : SB23.4441

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 950.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

Full Name (Last, First, Middle Initial) A. BOKHARI, TARIQ, , ,		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019
Mailing Address 3320 SHARON ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB23.4454 Amount of Each Disbursement this Period [REDACTED] 200.00 <input type="checkbox"/> Memo Item
City CHARLOTTE	State NC	
Zip Code 28211	Purpose of Disbursement THE TARIQ SCOTT BOKHARI COMMITTEE	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. BURR, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address POST OFFICE BOX 5928		FEC Identification Number C H2NC05074 Transaction ID : SB23.4430 Amount of Each Disbursement this Period [REDACTED] 500.00 <input type="checkbox"/> Memo Item
City WINSTON-SALEM	State NC	
Zip Code 27113	Purpose of Disbursement burr for senate	Category/ Type 011
Candidate Name BURR, RICHARD, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 05	

Full Name (Last, First, Middle Initial) C. EGGLESTON, LARKEN, , ,		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019
Mailing Address P O BOX 18253		FEC Identification Number C [REDACTED] Transaction ID : SB23.4452 Amount of Each Disbursement this Period [REDACTED] 200.00 <input type="checkbox"/> Memo Item
City CHARLOTTE	State NC	
Zip Code 28218	Purpose of Disbursement VOTE LARKEN EGGLESTON	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 900.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

Full Name (Last, First, Middle Initial) A. FOXX, VIRGINIA ANN, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address 616 RIME FOREST		FEC Identification Number C H4NC05146 Transaction ID : SB23.4431 Amount of Each Disbursement this Period 500.00
City BANNER ELK	State NC	
Purpose of Disbursement Virginia Fox for Congress		Memo Item <input type="checkbox"/>
Candidate Name FOXX, VIRGINIA ANN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 05	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JULIE EISELT		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019
Mailing Address PO BOX 12602		FEC Identification Number C Transaction ID : SB23.4447 Amount of Each Disbursement this Period 200.00
City CHARLOTTE	State NC	
Purpose of Disbursement Friends of Julie Eiselt		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. FRIENDS OF VI LYLES		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019
Mailing Address 7804 FAIRVIEW ROAD #121		FEC Identification Number C Transaction ID : SB23.4445 Amount of Each Disbursement this Period 300.00
City CHARLOTTE	State NC	
Purpose of Disbursement Vi Alexander Lyles For Mayor		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

A. FULLER, TREVOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 811 CENTRAL AVENUE
SUITE 5

City CHARLOTTE, NC State NC Zip Code 28204

Purpose of Disbursement Fuller for North Carolina

Candidate Name

Office Sought: House Senate President
State: NC District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 25 / 2019

FEC Identification Number C S0NC00285
Transaction ID : SB23.4448
Amount of Each Disbursement this Period 200.00

Memo Item

B. HUDSON, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement Hudson for Congress

Candidate Name

Office Sought: House Senate President
State: NC District: 08

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 09 / 13 / 2019

FEC Identification Number C H2NC08185
Transaction ID : SB23.4436
Amount of Each Disbursement this Period 250.00

Memo Item

C. MCCREADY, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 78855

City CHARLOTTE State NC Zip Code 28277

Purpose of Disbursement Dan McCready for Congress

Candidate Name

Office Sought: House Senate President
State: NC District: 09

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 25 / 2019

FEC Identification Number C H8NC09123
Transaction ID : SB23.4439
Amount of Each Disbursement this Period 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

Full Name (Last, First, Middle Initial) A. MCHENRY, PATRICK, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address PO BOX 2165		FEC Identification Number C H4NC10047 Transaction ID : SB23.4433 Amount of Each Disbursement this Period 500.00
City GASTONIA	State NC	
Purpose of Disbursement McHenry for Congress		Memo Item <input type="checkbox"/>
Candidate Name MCHENRY, PATRICK, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 10	

Full Name (Last, First, Middle Initial) B. SHERMAN FOR CONGRESS, BRAD, , ,		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019
Mailing Address 777 S. FIGUEROA STREET SUITE 4050		FEC Identification Number C H6CA24113 Transaction ID : SB23.4438 Amount of Each Disbursement this Period 500.00
City LOS ANGELES	State CA	
Purpose of Disbursement Shermon for Congress		Memo Item <input type="checkbox"/>
Candidate Name SHERMAN FOR CONGRESS, BRAD, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 30	

Full Name (Last, First, Middle Initial) C. TED BUDD FOR CONGRESS, TED, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address PO BOX 97127		FEC Identification Number C H6NC13129 Transaction ID : SB23.4432 Amount of Each Disbursement this Period 750.00
City RALEIGH	State NC	
Purpose of Disbursement Ted budd for Congress		Memo Item <input type="checkbox"/>
Candidate Name TED BUDD FOR CONGRESS, TED, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	

SUBTOTAL of Disbursements This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRULIANT FCU PAC

Full Name (Last, First, Middle Initial) A. TILLIS, THOM R, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address PO BOX 2489		FEC Identification Number C S4NC00162 Transaction ID : SB23.4429
City CORNELIUS	State NC	Zip Code 28031
Purpose of Disbursement contribution	Category/ Type 012	Amount of Each Disbursement this Period 500.00
Candidate Name TILLIS, THOM R, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NC District: 00	

Full Name (Last, First, Middle Initial) B. WALKER, MARK, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address PO BOX 99247		FEC Identification Number C H4NC06052 Transaction ID : SB23.4434
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement Walker 4 NC	Category/ Type 012	Amount of Each Disbursement this Period 500.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NC District: 06	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	6300.00