

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Meadows for Congress

ADDRESS (number and street) P.O. Box 811 Highlands NC 28741 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00503094 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT NC 11

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2011 through M M / D D / Y Y Y Y 12 / 31 / 2011

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 Pamela G. Ward

Signature of Treasurer Pamela G. Ward [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 30 / 2012

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 grid and FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Meadows for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	71832.27	71832.27
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	71832.27	71832.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	42848.07	42848.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	42848.07	42848.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	278984.20	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	253199.75	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Meadows for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64500.00	64500.00
(ii) Unitemized.....	1727.13	1727.13
(iii) TOTAL of contributions from individuals ▶	66227.13	66227.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	4000.00
(d) The Candidate.....	1605.14	1605.14
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	71832.27	71832.27
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	71832.27	321832.27

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	42848.07	42848.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	42848.07	42848.07

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	250000.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	71832.27
25. SUBTOTAL (add Line 23 and Line 24).....	321832.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42848.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	278984.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles W Archerd**

Mailing Address 504 Holt Lane

City Asheville State NC Zip Code 28803

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

Name of Employer Archerd-Bell Investment Group Occupation Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2011

**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert D Baber**

Mailing Address 5057 Lighthouse Court

City Morganton State NC Zip Code 28655

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

Name of Employer Baber Turnaround Consulting Occupation Economic Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.4325**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**James P. Bryson**

Mailing Address P.O. Box 1115

City Highlands State NC Zip Code 28741

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

Name of Employer Bryson Food Store Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : SA11AI.4301**

Amount of Each Receipt this Period  
**250.00**

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

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

**3250.00**

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

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

FOR LINE NUMBER: PAGE 6 OF 54  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eleanor M Cheney**

Mailing Address 358 Hill Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2011

**Transaction ID : SA11AI.4186**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eleanor M Cheney**

Mailing Address 358 Hill Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2011

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eleanor M Cheney**

Mailing Address 358 Hill Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2011

**Transaction ID : SA11AI.4189**

Amount of Each Receipt this Period  
2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>William H Cheney</b>		Date of Receipt MM / DD / YYYY 11 / 08 / 2011
Mailing Address 358 Hill Road		<b>Transaction ID : SA11AI.4190</b>
City Highlands	State NC	
Zip Code 28741	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer N/A	Occupation Retired	Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>William H Cheney</b>		Date of Receipt MM / DD / YYYY 11 / 08 / 2011
Mailing Address 358 Hill Road		<b>Transaction ID : SA11AI.4192</b>
City Highlands	State NC	
Zip Code 28741	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer N/A	Occupation Retired	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>William H Cheney</b>		Date of Receipt MM / DD / YYYY 11 / 08 / 2011
Mailing Address 358 Hill Road		<b>Transaction ID : SA11AI.4193</b>
City Highlands	State NC	
Zip Code 28741	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer N/A	Occupation Retired	Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff
Election Cycle-to-Date 7500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 54  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John W. Cleaveland**

Mailing Address P.O. Box 969

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
John Cleaveland Realty Real Estate

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2011

**Transaction ID : SA11AI.4297**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dean C. Colson**

Mailing Address 255 Alhambra Circle Penthouse

City State Zip Code  
Coral Gables FL 33134-7414

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

Name of Employer Occupation  
Colson & Hicks Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2011

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dean C. Colson**

Mailing Address 255 Alhambra Circle Penthouse

City State Zip Code  
Coral Gables FL 33134-7414

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

Name of Employer Occupation  
Colson & Hicks Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2011

**Transaction ID : SA11AI.4122**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dean C. Colson**

Mailing Address 255 Alhambra Circle Penthouse

City	State	Zip Code
Coral Gables	FL	33134-7414

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

Name of Employer	Occupation
Colson & Hicks	Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2011

**Transaction ID : SA11Al.4123**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Orville Coward Jr.**

Mailing Address P.O. Box 270

City	State	Zip Code
Webster	NC	28788

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

Name of Employer	Occupation
Coward, Hicks & Siler	Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11Al.4319**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**William H Coward**

Mailing Address P.O. Box 249

City	State	Zip Code
Cashiers	NC	28717

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

Name of Employer	Occupation
Coward, Hicks & Siler	Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11Al.4323**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

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

\_\_\_\_\_ 5000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Philip Deville**

Mailing Address 10120 Sabal Palm

City State Zip Code  
Coral Gables FL 33156

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 01 / 2011

**Transaction ID : SA11AI.4252**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Phil Drake**

Mailing Address 377 Brookwood Drive

City State Zip Code  
Franklin NC 28734

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

Name of Employer Occupation  
Drake Enterprises Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sharon Drake**

Mailing Address 377 Brookwood Drive

City State Zip Code  
Franklin NC 28734

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

Name of Employer Occupation  
N/A Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : SA11AI.4284**

Amount of Each Receipt this Period  
2500.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ernie Franklin**

Mailing Address 2 Ascot Manor, NW

City Atlanta State GA Zip Code 30327

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11AI.4313**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald F. Hunt**

Mailing Address 15 Cedar Hill Drive

City Asheville State NC Zip Code 28803

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2011

**Transaction ID : SA11AI.4167**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**G. Truett Jarrard Jr.**

Mailing Address P.O. Box 1321

City Cashiers State NC Zip Code 28717

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

Name of Employer Weathington Firm Occupation Physican

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2011

**Transaction ID : SA11AI.4293**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John A Kuhne**

Mailing Address 311 Turtle Hatch Road

City Naples State FL Zip Code 34103

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11AI.4321**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard H Langley**

Mailing Address P.O. Box 120188

City Clermont State FL Zip Code 34712

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2011

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Don C Livingston**

Mailing Address 2112 West Younge Street

City Pensacola State FL Zip Code 32505

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2011

**Transaction ID : SA11AI.4220**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**C. Wayne Loudermilch**

Mailing Address P.O. Box 22

City State Zip Code  
Point Clear AL 36564

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2011

**Transaction ID : SA11Al.4149**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jean Markley**

Mailing Address 150 Brightwaters Blvd, NE

City State Zip Code  
Saint Petersburg FL 33704

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

Name of Employer Occupation  
N/A Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2011

**Transaction ID : SA11Al.4270**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Markley**

Mailing Address 150 Brightwaters Blvd, NE

City State Zip Code  
Saint Petersburg FL 33704

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

Name of Employer Occupation  
Self-Employed Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2011

**Transaction ID : SA11Al.4268**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Maultsby**

Mailing Address P.O. Box 70

City State Zip Code  
Cashiers NC 28717

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles W McGrady**

Mailing Address 195 Fernbrook Way

City State Zip Code  
Hendersonville NC 28791

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

Name of Employer Occupation  
State of NC Legislator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2011

**Transaction ID : SA11AI.4228**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kyle M McKim**

Mailing Address P.O. Box 1771

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
Highlands Properties, Inc. Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : SA11AI.4317**

Amount of Each Receipt this Period  
2000.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**H. Ray McPhail**

Mailing Address 395 N. Cobb Road

City Highlands State NC Zip Code 28741

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2011

**Transaction ID : SA11AI.4309**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Blake Meadows**

Mailing Address P.O. Box 1214

City Highlands State NC Zip Code 28741

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

Name of Employer N/A Occupation Student

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.4347**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Meadows**

Mailing Address 685 Club Drive

City Athens State GA Zip Code 30607

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

Name of Employer Tower Digital Occupation Computer Programmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 01 / 2011

**Transaction ID : SA11AI.4345**

Amount of Each Receipt this Period  
 2400.00  
 In-Kind Donation - Consultation Services

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul A Moran**

Mailing Address 46 N. Washington Blvd, #25

City Sarasota	State FL	Zip Code 34236
------------------	-------------	-------------------

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

Name of Employer Paul A. Moran, P.A.	Occupation Attorney
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2011

**Transaction ID : SA11AI.4250**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**G.H. Pettway**

Mailing Address 100 Scenic Hwy, No. 25 Stonedge

City Lookout Mountain	State TN	Zip Code 37350
--------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2011

**Transaction ID : SA11AI.4299**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Christopher S. Riley**

Mailing Address 618 McDaniel Avenue

City Greenville	State SC	Zip Code 29605
--------------------	-------------	-------------------

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

Name of Employer Regions Bank	Occupation Banker
----------------------------------	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : SA11AI.4287**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Rothbaum**

Mailing Address 17320 Northway Circle

City State Zip Code  
Boca Raton FL 33496

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Stan Shelley**

Mailing Address 25 Country Road

City State Zip Code  
Hendersonville NC 28791

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

Name of Employer Occupation  
Shelley's Jewelry Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : SA11AI.4327**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Virginia Smith**

Mailing Address 1437 Shortoff Road

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2011

**Transaction ID : SA11AI.4124**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Albert L Sneed**

Mailing Address 11 N. Market Street

City Asheville State NC Zip Code 28801

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

Name of Employer Van Winkle Law Firm Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2011

**Transaction ID : SA11AI.4212**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Stepelton**

Mailing Address 5110 N. Federal Highway

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : SA11AI.4230**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Gregory Ward**

Mailing Address P.O. Box 2692

City Highlands State NC Zip Code 28741

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

Name of Employer Trillium Links & Village Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2011

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pam Ward**

Mailing Address P.O. Box 2692

City State Zip Code  
Highlands NC 28741

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

Name of Employer Occupation  
Gilliam's Promise, Inc. Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**544.63**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 31 2011**

**Transaction ID : SA11AI.4349**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Roger Ward**

Mailing Address P. O. Box 618

City State Zip Code  
Cashiers NC 28717

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

Name of Employer Occupation  
R. T. Ward, Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 17 2011**

**Transaction ID : SA11AI.4153**

Amount of Each Receipt this Period  
**300.00**

In-kind - Donated used iPhone 4

**C.** Full Name (Last, First, Middle Initial)  
**Arthur L Williams**

Mailing Address 277 Royal Poinciana Way, #135

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
Self Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 07 2011**

**Transaction ID : SA11AI.4214**

Amount of Each Receipt this Period  
**2000.00**

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia S. Williamson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2011	
Mailing Address 2127 Rosemont Drive		<b>Transaction ID : SA11Al.4169</b>	
City Montgomery	State AL	Zip Code 36111	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer N/A	Occupation Housewife		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	64500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT JEFF MILLER**

Mailing Address PO BOX 6338

City Hendersonville State NC Zip Code 28793

FEC ID number of contributing federal political committee. **C** C00474858

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11C.4332**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT JEFF MILLER**

Mailing Address PO BOX 6338

City Hendersonville State NC Zip Code 28793

FEC ID number of contributing federal political committee. **C** C00474858

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11C.4334**

Amount of Each Receipt this Period  
 2000.00

**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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

4000.00

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **250400.00**

Date of Receipt: **10 / 01 / 2011**

**Transaction ID : SA11D.4479**

Amount of Each Receipt this Period: **400.00**

In Kind - Office Rent

**B.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **250800.00**

Date of Receipt: **11 / 01 / 2011**

**Transaction ID : SA11D.4480**

Amount of Each Receipt this Period: **400.00**

In Kind - Office Rent

**C.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City: Highlands      State: NC      Zip Code: 28741

FEC ID number of contributing federal political committee: **C H2NC11080**

Name of Employer: Highlands Properties, Inc.      Occupation: Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **251200.00**

Date of Receipt: **12 / 01 / 2011**

**Transaction ID : SA11D.4483**

Amount of Each Receipt this Period: **400.00**

In Kind - Office Rent

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R Meadows**

Mailing Address P.O. Box 811

City Highlands      State NC      Zip Code 28741

FEC ID number of contributing federal political committee. **C H2NC11080**

Name of Employer Highlands Properties, Inc.      Occupation Real Estate Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **251605.14**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 31 / 2011**

**Transaction ID : SA11D.4484**

Amount of Each Receipt this Period  
**405.14**

In-Kind - Office Supplies; Gifts from Campaign; Postage; Parking - No itemization

**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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

**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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**405.14**

**1605.14**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. 11th District Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address P.O. Box 1963		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.4208</b>
City Bryson City	State NC	
Zip Code 28713	Purpose of Disbursement Golden Elephant Dinner Tickets	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Thomas Beach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 6112 N. 26th Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4223</b>
City McAllen	State TX	
Zip Code 78504	Purpose of Disbursement Consultant	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Thomas Beach</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 6112 N. 26th Street		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.4257</b>
City McAllen	State TX	
Zip Code 78504	Purpose of Disbursement Consultant	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Burke County Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 110 East Meeting Street		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : SB17.4139</b>
City Morganton	State NC	
Zip Code 28655	Purpose of Disbursement Membership Dues	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Burke County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address c/o Delta Company Police/R. Epley P.O. Box 999		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4145</b>
City Valdese	State NC	
Zip Code 28690	Purpose of Disbursement Table Sponsor - Take Back NC Dinner	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Deborah Burritt</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address 102 Abbey Circle		Amount of Each Disbursement this Period 75.48 <b>Transaction ID : SB17.4211</b>
City Asheville	State NC	
Zip Code 28805	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 777.38 <b>Transaction ID : SB17.4175</b>
City Charlotte	State NC	
Zip Code 28272-1083	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 574.80 <b>Transaction ID : SB17.4175.0</b> <b>[MEMO ITEM]</b>
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Airline Ticket	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address 1917 Bladensburg Road North		Amount of Each Disbursement this Period 202.58 <b>Transaction ID : SB17.4175.1</b> <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Hotel	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	777.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 533.80 <b>Transaction ID : SB17.4240</b>
City Charlotte	State NC	
Zip Code 28272-1083	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 66.90 <b>Transaction ID : SB17.4240.1</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phones	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 266.90 <b>Transaction ID : SB17.4240.2</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phones	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	533.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011
Mailing Address P.O. Box 71083		Amount of Each Disbursement this Period 651.47 <b>Transaction ID : SB17.4303</b>
City Charlotte	State NC	
Zip Code 28272-1083	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 3.38 <b>Transaction ID : SB17.4303.2</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phones	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 53.38 <b>Transaction ID : SB17.4303.3</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phones	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	651.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 50.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phones	Transaction ID : SB17.4303.4
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 88.00
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.4303.6
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 675 South 4th Street		Amount of Each Disbursement this Period 132.00
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage	Transaction ID : SB17.4303.7
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 1395.60 <b>Transaction ID : SB17.4255</b>
City Cashiers	State NC	
Zip Code 28717	Purpose of Disbursement Letterhead, Thank You Notes, Business Cards, Envelopes	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Jim Clayton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 262.50 <b>Transaction ID : SB17.4261</b>
City Mills River	State NC	
Zip Code 28759	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Jim Clayton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 223.11 <b>Transaction ID : SB17.4263</b>
City Mills River	State NC	
Zip Code 28759	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1881.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jim Clayton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 5 Mallard Circle		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.4264</b>
City Mills River	State NC	
Zip Code 28759	Purpose of Disbursement Compensation - Campaign work	Category/Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1067.82 <b>Transaction ID : SB17.4136</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Mileage Reimbursement	Category/Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4137</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2417.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 54		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4138</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 209.34 <b>Transaction ID : SB17.4160</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Reimbursement - Lunches from 10/1/11 - 10/19/11 - no itemization	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4183</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2809.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1376.40 <b>Transaction ID : SB17.4197</b>
City State Zip Code Connellys Springs NC 28612	Purpose of Disbursement Mileage Reimbursement	
Candidate Name <b>Meadows for Congress</b>		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4198</b>
City State Zip Code Connellys Springs NC 28612	Purpose of Disbursement Compensation - Campaign work	
Candidate Name <b>Meadows for Congress</b>		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4241</b>
City State Zip Code Connellys Springs NC 28612	Purpose of Disbursement Compensation - Campaign work	
Candidate Name <b>Meadows for Congress</b>		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3976.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1094.20 <b>Transaction ID : SB17.4242</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 40.27 <b>Transaction ID : SB17.4247</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Reimbursement - Toy for Caldwell County Christmas Party, Lunch	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4258</b>
City Connellys Springs	State NC	
Zip Code 28612	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1234.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Doug Crosby</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 2854 Childers Nursery Circle		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB17.4290</b>
City Connellys Springs	State NC	
Purpose of Disbursement Compensation - Campaign work		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Crossroads Chronicle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address P.O. Box 1040		Amount of Each Disbursement this Period 105.75 <b>Transaction ID : SB17.4202</b>
City Cashiers	State NC	
Purpose of Disbursement Advertising		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. FIA Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 574.32 <b>Transaction ID : SB17.4163</b>
City Wilmington	State DE	
Purpose of Disbursement Credit Card Transactions		Category/ Type 001
Candidate Name <b>Meadows for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1980.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hyperformance Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 3197 Highway 127 S		Amount of Each Disbursement this Period 209.76
City Hickory	State NC	Zip Code 28602
Purpose of Disbursement Banners	Category/ Type 001	<b>Transaction ID : SB17.4163.4</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. FIA Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 2427.03
City Wilmington	State DE	Zip Code 19886-5019
Purpose of Disbursement Credit Card Transactions	Category/ Type 001	<b>Transaction ID : SB17.4233</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>c. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 244.33
City Cashiers	State NC	Zip Code 28717
Purpose of Disbursement Business Cards	Category/ Type 001	<b>Transaction ID : SB17.4233.2</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2427.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cashier's Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2011
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 294.41
City Cashiers	State NC	
Zip Code 28717		Transaction ID : SB17.4233.9
Purpose of Disbursement Letterhead, Envelopes, Magnetic Name Badge	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2011
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 361.68
City Lexington	State KY	
Zip Code 40503		Transaction ID : SB17.4233.17
Purpose of Disbursement Mini Footballs	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 731.12
City Lexington	State KY	
Zip Code 40503		Transaction ID : SB17.4233.18
Purpose of Disbursement Lapel Stickers	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. FIA Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 982.27 <b>Transaction ID : SB17.4274</b>
City Wilmington	State DE	
Zip Code 19886-5019	Purpose of Disbursement Credit Card Transactions	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 123.29 <b>Transaction ID : SB17.4274.2</b> <b>[MEMO ITEM]</b>
City Lexington	State KY	
Zip Code 40503	Purpose of Disbursement Magnetic Name Badges	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 280.36 <b>Transaction ID : SB17.4274.3</b> <b>[MEMO ITEM]</b>
City Lexington	State KY	
Zip Code 40503	Purpose of Disbursement White T-Shirts	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	982.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ad-venture Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 2625 Regency Road		Amount of Each Disbursement this Period 454.50
City Lexington State KY Zip Code 40503	Purpose of Disbursement Weekender Caps	Transaction ID : SB17.4274.4
Candidate Name Meadows for Congress	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 444.50
City Youngsville State NC Zip Code 27596	Purpose of Disbursement Compensation - Campaign work	Transaction ID : SB17.4196
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 261.50
City Youngsville State NC Zip Code 27596	Purpose of Disbursement Compensation - Campaign work	Transaction ID : SB17.4236
Candidate Name Meadows for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	706.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 298.59 <b>Transaction ID : SB17.4237</b>
City Youngsville	State NC	
Purpose of Disbursement Mileage Reimbursement	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Carlton Huffman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 5817 Rocking Chair Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4259</b>
City Youngsville	State NC	
Purpose of Disbursement Compensation - Campaign work	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mary Ann Moran Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 46 N. Washington Blvd, Ste 25		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.4275</b>
City Sarasota	State FL	
Purpose of Disbursement Consulting	Category/ Type 001	
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1298.59
<b>TOTAL</b> This Period (last page this line number only).....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2011</b>
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period <b>400.00</b> <b>Transaction ID : SB17.4478</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Office Rent	Category/ Type <b>001</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC    District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2011</b>
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period <b>400.00</b> <b>Transaction ID : SB17.4481</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In Kind - Office Rent	Category/ Type <b>001</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC    District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2011</b>
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period <b>400.00</b> <b>Transaction ID : SB17.4482</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In Kind - Office Rent	Category/ Type <b>001</b>
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC    District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 405.14 <b>Transaction ID : SB17.4488</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In Kind - See below	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 12.08 <b>Transaction ID : SB17.4488.0</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Ingles - Office Supplies	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 18.00 <b>Transaction ID : SB17.4488.1</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Parking	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	405.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 49.09
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - The Dry Sink - Office Supplies	Transaction ID : SB17.4488.2 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 33.84
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Acorns - Gifts from Campaign	Transaction ID : SB17.4488.3 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>C. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 145.18
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Acorn's - Gifts from Campaign	Transaction ID : SB17.4488.4 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011	
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 4.12	
City Highlands	State NC		Zip Code 28741
Purpose of Disbursement In-Kind - Ingles - Office Supplies	Category/ Type 001		
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4488.5  [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011	
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 18.67	
City Highlands	State NC		Zip Code 28741
Purpose of Disbursement In-Kind - OfficeMax - Office Supplies	Category/ Type 001		
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4488.6  [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011	
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 12.17	
City Highlands	State NC		Zip Code 28741
Purpose of Disbursement In-Kind - Stork's Wrap, Pack & Ship - Shipping	Category/ Type 001		
Candidate Name <b>Meadows for Congress</b>		Transaction ID : SB17.4488.7  [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 54			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 7.74
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Highlands Office Supply - Office Supplies	Transaction ID : SB17.4488.8 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 4.81
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Cashier's Printing - Office Supplies	Transaction ID : SB17.4488.9 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 4.25
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Zoller Hardware - Office Supplies	Transaction ID : SB17.4488.10 <b>[MEMO ITEM]</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark R Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 95.19
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement In-Kind - Jacob's Well - Gifts from Campaign	Transaction ID : <b>SB17.4488.11</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Scott Meadows</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 685 Club Drive		Amount of Each Disbursement this Period 2400.00
City Athens	State GA	
Zip Code 30607	Purpose of Disbursement In-Kind - Consultation Services	Transaction ID : <b>SB17.4351</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. QGIV</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period 14.06
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit Card Fees	Transaction ID : <b>SB17.4378</b>
Candidate Name <b>Meadows for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2414.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. RedCyclone</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address P.O. Box 5861		Amount of Each Disbursement this Period 372.00 <b>Transaction ID : SB17.4134</b>
City Alpharetta	State GA	
Zip Code 30023	Purpose of Disbursement Bumper Stickers	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Sierra Investment Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 1504 Fifth Avenue West		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4238</b>
City Hendersonville	State NC	
Zip Code 28739	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4171</b>
City Asheville	State NC	
Zip Code 28778	Purpose of Disbursement Consultant	Category/ Type 003
Candidate Name Meadows for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2872.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period ..... 100.00 <b>Transaction ID : SB17.4260</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant	
Candidate Name <b>Meadows for Congress</b>		Category/ Type 003
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>B. Patricia Smothers</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 130 Dalya Road		Amount of Each Disbursement this Period ..... 300.00 <b>Transaction ID : SB17.4315</b>
City Asheville State NC Zip Code 28778	Purpose of Disbursement Consultant	
Candidate Name <b>Meadows for Congress</b>		Category/ Type 003
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>c. The Stoneridge Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period ..... 5532.07 <b>Transaction ID : SB17.4157</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Brochures, Handout Cards, PDF Flyer, Rally Signs, Design Website	
Candidate Name <b>Meadows for Congress</b>		Category/ Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	..... 5932.07
<b>TOTAL</b> This Period (last page this line number only) .....	.....



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.4277</b>
City Alpharetta State GA Zip Code 30022	Category/Type 001	
Purpose of Disbursement Photography	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Transylvania County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address P.O. Box 1408		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4182</b>
City Brevard State NC Zip Code 28712	Category/Type 001	
Purpose of Disbursement Golf Tournament Hole Sponsor - Connestee Falls	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Unicom</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address P.O.Box 289		Amount of Each Disbursement this Period 55.25 <b>Transaction ID : SB17.4289</b>
City Franklin State NC Zip Code 28744-0289	Category/Type 001	
Purpose of Disbursement Telephone	Candidate Name <b>Meadows for Congress</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2855.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 1204.50 <b>Transaction ID : SB17.4185</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>B. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 506.00 <b>Transaction ID : SB17.4243</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Compensation - Campaign work	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

Full Name (Last, First, Middle Initial) <b>C. Pamela G. Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 12.42 <b>Transaction ID : SB17.4307</b>
City Highlands	State NC	
Zip Code 28741	Purpose of Disbursement Postage Reimbursement	Category/ Type 001
Candidate Name <b>Meadows for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 11	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1722.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 54		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

Full Name (Last, First, Middle Initial) <b>A. Roger Ward</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address P. O. Box 618		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4155</b>
City Cashiers State NC Zip Code 28717	Purpose of Disbursement In-kind - Donated used iPhone 4 Candidate Name <b>Meadows for Congress</b> Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	41227.77

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Meadows for Congress** Transaction ID : **SC/10.4101**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Mark R Meadows** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address P.O. Box 811  
 City Highlands State NC ZIP Code 28741

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

**TERMS**  
 Date Incurred: M 09 / D 29 / Y 2011  
 Date Due: M / D / Y none  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	250000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	250000.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 53 OF 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mark R Meadows</b>	Nature of Debt (Purpose): Testing the Waters - Consultant
Mailing Address P.O. Box 811	
City State Zip Code Highlands NC 28741	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4362</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mark R Meadows</b>	Nature of Debt (Purpose): Testing the Waters - Consultant
Mailing Address P.O. Box 811	
City State Zip Code Highlands NC 28741	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4364</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mark R Meadows</b>	Nature of Debt (Purpose): Marketing - Handout Cards
Mailing Address P.O. Box 811	
City State Zip Code Highlands NC 28741	

Outstanding Balance Beginning This Period 199.75	<b>Transaction ID : SD10.4363</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 199.75

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2199.75
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	250000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	250000.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Meadows for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mark R Meadows</b>	Nature of Debt (Purpose): Testing the Waters - Consultant
Mailing Address P.O. Box 811	
City State Zip Code Highlands NC 28741	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4365</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	3199.75
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	250000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	253199.75