

**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

BERGER FOR CONGRESS

ADDRESS (number and street)

PO BOX 3117

Check if different  
than previously  
reported. (ACC)

EDEN

NC

27289

2. FEC IDENTIFICATION NUMBER ▼

C

C00552638

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NC

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2015

through

M M / D D / Y Y Y Y

03 / 31 / 2015

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 Amy B Ellis

Signature of Treasurer

Amy B Ellis

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

**BERGER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	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))....	2600.00	558106.21
(b) Total Contribution Refunds (from Line 20(d)) .....	5100.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	-2500.00	553106.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	6394.99	549375.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	233.24	199.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	6161.75	549175.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5213.26	
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) .....	25321.78	

**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

PAGE 3 / 13

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**BERGER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

2600.00

349016.21

(ii) Unitemized.....

0.00

16140.00

(iii) TOTAL of contributions from individuals ▶

2600.00

365156.21

(b) Political Party Committees.....

0.00

0.00

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

0.00

192950.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

2600.00

558106.21

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

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

0.00

10000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

10000.00

**14. OFFSETS TO OPERATING EXPENDITURES**

(Refunds, Rebates, etc.) .....

233.24

199.82

**15. OTHER RECEIPTS**

(Dividends, Interest, etc.) .....

0.00

0.00

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

2833.24

568306.03

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6394.99	549375.13
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 .....	5100.00	3000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5100.00	5000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	11494.99	554375.13

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	13875.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2833.24
25. SUBTOTAL (add Line 23 and Line 24).....	16708.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11494.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5213.26

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

FOR LINE NUMBER:

PAGE 5 OF 13

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Randolph Luddy****A.**

Mailing Address 1912 Chalk Road

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

**Transaction ID : SA11Al.6120**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

2600.00

2600.00

# **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 6 OF 13

<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)  
**BERGER FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>US Postal Service</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>09</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		09		2015
M M	/	D D	/	Y Y Y Y									
01		09		2015									
Mailing Address <b>Friendly Station</b>		<b>Transaction ID : SA14.6122</b>											
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27408</b>	Amount of Each Receipt this Period <table border="1"> <tr> <td>233.24</td> </tr> </table>	233.24									
233.24													
FEC ID number of contributing federal political committee. <b>C</b>		postage refund											
Name of Employer  	Occupation  												
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>	Election Cycle-to-Date <table border="1"> <tr> <td>233.24</td> </tr> </table>			233.24									
233.24													

  

<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

  

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td>233.24</td> </tr> </table>	233.24
233.24			
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td>233.24</td> </tr> </table>	233.24
233.24			

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

PAGE 7 OF 13

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

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NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Scott Miller**Mailing Address 5219 Fox Hunt Dr  
Apt E

City Greensboro State NC Zip Code 27407

Purpose of Disbursement  
consulting

Candidate Name

**BERGER FOR CONGRESS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2015

Amount of Each Disbursement this Period

625.00
--------

Transaction ID : SB17.6127

**B. Time Warner Cable**

Mailing Address PO Box 70872

City Charlotte State NC Zip Code 28272

Purpose of Disbursement  
cable

Candidate Name

**BERGER FOR CONGRESS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2015

Amount of Each Disbursement this Period

1490.03
---------

Transaction ID : SB17.6137

**c. Time Warner Cable**

Mailing Address PO Box 70872

City Charlotte State NC Zip Code 28272

Purpose of Disbursement  
cable

Candidate Name

**BERGER FOR CONGRESS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2015

Amount of Each Disbursement this Period

1129.86
---------

Transaction ID : SB17.6139

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

3244.89





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

PAGE 9 OF 13

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

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NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Jasie Barringer**

Mailing Address 1620 Fairfax Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2015

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement  
refund

010

Amount of Each Disbursement this Period

5000.00	1500.00
---------	---------

Transaction ID : SB20A.6134

Candidate Name

**BERGER FOR CONGRESS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

Full Name (Last, First, Middle Initial)

**B. Jimmy D Clark**

Mailing Address PO Box 7776

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2015

City	State	Zip Code
Greensboro	NC	27417

Purpose of Disbursement  
refund

010

Amount of Each Disbursement this Period

5000.00	1000.00
---------	---------

Transaction ID : SB20A.6135

Candidate Name

**BERGER FOR CONGRESS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

Full Name (Last, First, Middle Initial)

**C. Robert Luddy**

Mailing Address 4641 Paragon Park Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2015

City	State	Zip Code
Raleigh	NC	27616

Purpose of Disbursement  
refund

010

Amount of Each Disbursement this Period

5000.00	2600.00
---------	---------

Transaction ID : SB20A.6132

Candidate Name

**BERGER FOR CONGRESS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: NC District: 06

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

5100.00

5100.00

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

PAGE 10 OF 13

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5929

**BERGER FOR CONGRESS****LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2014

Phil Berger Jr

☐ Primary☐ General☒ Other (specify) ▼

Runoff

Mailing Address  
402 Greenway Drive

City

State

ZIP Code

Eden

NC

27288

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y  
08 / 22 / 2014M M / D D / Y Y  
10/31/14Y Y Y Y / Y Y  
0.00

% (apr)

☐ 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:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

**TOTALS** This Period (last page in this line only)..... ►

10000.00

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 11 OF 13

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gillum Ferguson**Nature of Debt (Purpose):  
consulting

Mailing Address 1709 Forest Valley Rd

City State

Zip Code

Greensboro

NC

27410

Outstanding Balance Beginning This Period

625.00

Transaction ID : SD10.6093

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Tyler Haymore**Nature of Debt (Purpose):  
consulting

Mailing Address 1709 Forest Valley Rd

City State

Zip Code

Greensboro

NC

27410

Outstanding Balance Beginning This Period

625.00

Transaction ID : SD10.6096

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kohn Associates**Nature of Debt (Purpose):  
election expenses

Mailing Address 1140 Harp Street

City

State

Zip Code

Raleigh

NC

27604

Outstanding Balance Beginning This Period

3156.22

Transaction ID : SD10.6088

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3156.22

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

4406.22

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 12 OF 13

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Matt Mercer**Nature of Debt (Purpose):  
consulting

Mailing Address 190 Ellisboro Rd

City State

Zip Code

Madison

NC

27025

Outstanding Balance Beginning This Period

1250.00

Transaction ID : SD10.6094

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Scott Miller**Nature of Debt (Purpose):  
consultingMailing Address 5219 Fox Hunt Dr  
Apt E

City State

Zip Code

Greensboro

NC

27407

Outstanding Balance Beginning This Period

625.00

Transaction ID : SD10.6095

Amount Incurred This Period

0.00

Payment This Period

625.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Public Opinion Strategies**Nature of Debt (Purpose):  
polling/research

Mailing Address 214 N Fayette St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

6500.00

Transaction ID : SD10.6089

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6500.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

7750.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 13 OF 13

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BERGER FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Stewart Group**Nature of Debt (Purpose):  
yard signs

Mailing Address PO Box 26508

City State

Zip Code

Raleigh

NC

27611

Outstanding Balance Beginning This Period

3165.56

Transaction ID : SD10.6091

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3165.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Time Warner Cable**Nature of Debt (Purpose):  
cable/internet campaign offices

Mailing Address PO Box 70872

City State

Zip Code

Charlotte

NC

28272

Outstanding Balance Beginning This Period

1490.03

Transaction ID : SD10.6087

Amount Incurred This Period

0.00

Payment This Period

1490.03

Outstanding Balance at Close of This Period

0.00

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) **SUBTOTALS** This Period This Page (optional) ..... ►

3165.56

2) **TOTALS** This Period (last page this line number only) ..... ►

15321.78

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

10000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

25321.78