

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. Elisabeth Motsinger for Congress

ADDRESS (number and street) 6548 Woodmere Drive Walkertown NC 27051-9426

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00508580 3. IS THIS REPORT NEW (N) OR AMENDED (A) NC 05

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 MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of NC

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 10/18/2012 through 11/26/2012

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 John K Motsinger Sr

Signature of Treasurer John K Motsinger Sr [Electronically Filed] Date MM/DD/YYYY 11/30/2012

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

Table with 7 columns and 1 row for Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Elisabeth Motsinger 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))....	11363.00	130284.49
(b) Total Contribution Refunds (from Line 20(d))	0.00	750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11363.00	129534.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28409.62	115701.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	75.00	204.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28334.62	115496.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9511.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4500.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Elisabeth Motsinger for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="4045.00"/>	<input type="text" value="66567.85"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="6318.00"/>	<input type="text" value="59691.29"/>	<input type="text" value="420.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="10363.00"/>	<input type="text" value="126259.14"/>	<input type="text" value="420.00"/>
(b) Political Party Committees		
<input type="text" value="1000.00"/>	<input type="text" value="3400.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="335.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	290.35	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
11363.00	130284.49	420.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	2000.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	2000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
75.00	204.62	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
11438.00	132489.11	420.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 50

Write or Type Committee Name

Elisabeth Motsinger for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
28409.62	115701.48	1138.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	750.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 50

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	750.00	0.00
------	--------	------

21. OTHER DISBURSEMENTS

111.21	5800.28	6.74
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

28520.83	122251.76	1145.43
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

11363.00	129534.49	420.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

28334.62	115496.86	1138.69
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	26594.75
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	11438.00
25. SUBTOTAL (add Line 23 and Line 24).....	38032.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28520.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	9511.92

**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 50
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Khosrow Bahrani

Mailing Address 1221 Partridge Ln

City Winston Salem State NC Zip Code 27106-4907

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : C8946443

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
Barry Boneno

Mailing Address 1408 hannafor rd.

City winston salem State NC Zip Code 27103-2908

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

Name of Employer Information Requested Occupation Information Requested
 none retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : C8933671

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Wendy Brenner

Mailing Address 269 Hidden Creek Dr

City Advance State NC Zip Code 27006-8755

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

Name of Employer Information Requested Occupation Information Requested
 self Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : C8904697

Amount of Each Receipt this Period
 1000.00

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 8 OF 50
	<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)
Elisabeth Motsinger for Congress

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

Mailing Address 608 W End Blvd

City Winston Salem State NC Zip Code 27101-1137

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

Name of Employer self Occupation Information Requested

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 / 31 / 2012

Transaction ID : C8946481

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Janet R Hullihan

Mailing Address 100 West Banner Ave.

City Winston-Salem State NC Zip Code 27127

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

Name of Employer Aycock Auditorium - UNCG Occupation Retired-Assistant Director Event Produ

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 / 18 / 2012

Transaction ID : C8913833

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Michael P Lischke

Mailing Address 422 Wesley Park Dr

City Kernersville State NC Zip Code 27284-2100

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

Name of Employer Information Requested Occupation Information Requested

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 / 24 / 2012

Transaction ID : C8926123

Amount of Each Receipt this Period
 250.00

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

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

850.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Donna M Schmid

Mailing Address 720 Tam O Shanter Trl

City State Zip Code
Winston Salem NC 27103-1229

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

Name of Employer Senior Care, PA Occupation Medicine

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : C8913815

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Patricia W Toole

Mailing Address 1836 Virginia Rd

City State Zip Code
Winston Salem NC 27104-2316

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

Name of Employer none Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8920771

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Gayle G Tuch

Mailing Address PO Box 1006
7901 Fair Oaks Ct,

City State Zip Code
Clemmons NC 27012-1006

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : C8917352

Amount of Each Receipt this Period
50.00

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

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

450.00

**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 50
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Connie Bhimoreddy		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012	
Mailing Address 1750 chelsea place dr		Transaction ID : C8934028A	
City Kernersville	State NC	Zip Code 27284	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Homemaker		* Earmarked Contribution: See Below
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 235.00		

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2012	
Mailing Address PO Box 382110		Transaction ID : C8934028AB	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C C00401224			
Name of Employer	Occupation Conduit total listed in Agg. field		[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4758.00		

Full Name (Last, First, Middle Initial) C. Robert Bloomfield		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 805 Buttonwood Dr		Transaction ID : C8969765A	
City Winston Salem	State NC	Zip Code 27104-1207	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation HEALTHCARE		* Earmarked Contribution: See Below
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 200.00
TOTAL 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: (check only one)	PAGE 11 OF 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ **4758.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2012

Transaction ID : C8969765AB

Amount of Each Receipt this Period
 _____ **100.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
H Michael Britt

Mailing Address **One Park Vista Lane #540**

City **Winston-Salem** State **NC** Zip Code **27101**

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

Name of Employer **The Centers for Exceptional Children** Occupation
Executive Director

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ **600.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2012

Transaction ID : C8969760A

Amount of Each Receipt this Period
 _____ **50.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ **4758.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2012

Transaction ID : C8969760AB

Amount of Each Receipt this Period
 _____ **50.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

_____ **50.00**

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Bob Caviness

Mailing Address 3113 Bentley Ct

City Winston-Salem State NC Zip Code 27104-1800

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

Name of Employer none Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : C8914487A

Amount of Each Receipt this Period
 50.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **4758.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2012

Transaction ID : C8914487AB

Amount of Each Receipt this Period
 50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Bob Caviness

Mailing Address 3113 Bentley Ct

City Winston-Salem State NC Zip Code 27104-1800

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

Name of Employer none Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8934029A

Amount of Each Receipt this Period
 50.00

* Earmarked Contribution: See Below

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

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

100.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2012

Transaction ID : C8934029AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Nan Griswold

Mailing Address **135 Wareham Lane**

City **Winston Salem** State **NC** Zip Code **27016**

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

Name of Employer Occupation
Second Harvest Food Bank NUNC Retired Founding Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2012

Transaction ID : C8914485A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2012

Transaction ID : C8914485AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

100.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Nan Griswold

Mailing Address 135 Wareham Lane

City State Zip Code
Winston Salem NC 27016

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

Name of Employer Occupation
Second Harvest Food Bank NWNC Retired Founding Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : C8934030A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : C8934030AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Susan Grote

Mailing Address 1508 barrington way court

City State Zip Code
winston-salem NC 27106-4798

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

Name of Employer Occupation
none not employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2780.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2012

Transaction ID : C8934043A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

350.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2012

Transaction ID : C8934043AB

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Susan Grote

Mailing Address **1508 barrington way court**

City **winston-salem** State **NC** Zip Code **27106-4798**

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

Name of Employer **none** Occupation **not employed**

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
2780.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2012

Transaction ID : C8969747A

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				55.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2012

Transaction ID : C8969747AB

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				55.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

_____	_____	_____	_____	_____
				55.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
David B Hough

Mailing Address 2719 Country Club Rd

City Winston Salem State NC Zip Code 27104-3011

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

Name of Employer David B. Hough, PA, 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
 10 / 22 / 2012

Transaction ID : C8934020A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2012

Transaction ID : C8934020AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
David B Hough

Mailing Address 2719 Country Club Rd

City Winston Salem State NC Zip Code 27104-3011

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

Name of Employer David B. Hough, PA, 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 / 01 / 2012

Transaction ID : C8969761A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

200.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2012

Transaction ID : C8969761AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Holly Ivey

Mailing Address **2334 Lyndhurst Avenue**

City **Winston-Salem** State **NC** Zip Code **27103**

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

Name of Employer **Novant** Occupation **physician**

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2012

Transaction ID : C8914484A

Amount of Each Receipt this Period

50.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2012

Transaction ID : C8914484AB

Amount of Each Receipt this Period

50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

50.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Lyng

Mailing Address 312 Garden Valley Dr

City Winston Salem State NC Zip Code 27107-5008

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : C8914483A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2012

Transaction ID : C8914483AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Thomas Lyng

Mailing Address 312 Garden Valley Dr

City Winston Salem State NC Zip Code 27107-5008

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : C8969753A

Amount of Each Receipt this Period
65.00

* Earmarked Contribution: See Below

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

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

165.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2012

Transaction ID : C8969753AB

Amount of Each Receipt this Period
65.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Jane Motsinger

Mailing Address **440 Fax Welborn Rd**

City **State Road** State **NC** Zip Code **28676-8713**

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

Name of Employer Occupation
none not employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
810.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2012

Transaction ID : C8969746A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2012

Transaction ID : C8969746AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

100.00

**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 50
	<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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
Brian D Stone

Mailing Address 3515 Old Pfafftown Road

City Winston-Salem State NC Zip Code 27106-2583

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

Name of Employer Allergy Partners, PA Occupation Physician

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 / 21 / 2012

Transaction ID : C8914497A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2012

Transaction ID : C8914497AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Joan Wright

Mailing Address 4866 Old Greensboro Rd.

City Thomasville State NC Zip Code 27360

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

Name of Employer none Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : C8969750A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 21 OF 50
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4758.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2012

Transaction ID : C8969750AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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 / D D / 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 / D D / 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).....

0.00

4045.00

**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 50
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial)
North Carolina Democratic Party

Mailing Address 220 Hillsborough St

City Raleigh State NC Zip Code 27603-1724

FEC ID number of contributing federal political committee. **C** C00165688

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
 11 / 02 / 2012

Transaction ID : C8946430

Amount of Each Receipt this Period
 1000.00

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 / 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 / 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).....

1000.00

1000.00

**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 23 OF 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 67.14 Transaction ID : D421646
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 9.89 Transaction ID : D424373
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Zachary Bailes		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 3706 Imperial place 1465 Brookwood Dr. Winston-Salem,		Amount of Each Disbursement this Period 750.00 Transaction ID : D420166
City Owensboro	State KY	
Zip Code 42301	Purpose of Disbursement communication/media manager	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	827.03
TOTAL 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 24 OF 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Biscuitville			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 2648 Reynolds Road			Amount of Each Disbursement this Period 14.93	
City Winston Salem	State NC	Zip Code 27106	Transaction ID : D423786	
Purpose of Disbursement coffee for poll greeters		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Bully Documentary			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 112 Shady Blvd			Amount of Each Disbursement this Period 500.00	
City Winston Salem	State NC	Zip Code 27101-3724	Transaction ID : D423423	
Purpose of Disbursement web video		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Catawba County Chamber Of Commerce			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012	
Mailing Address PO Box 1828			Amount of Each Disbursement this Period 50.00	
City Hickory	State NC	Zip Code 28603	Transaction ID : D420471	
Purpose of Disbursement tickets to meet and greet		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	564.93
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Charter Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 1305 10th Ave Lane SE		Amount of Each Disbursement this Period 1680.45 Transaction ID : D421857
City Hickory	State NC	
Zip Code 28602	Purpose of Disbursement Cable advertising 11/1 to 11/5	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. City of Winston Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address PO Box 2756		Amount of Each Disbursement this Period 35.30 Transaction ID : D418900
City Winston Salem	State NC	
Zip Code 27102-2756	Purpose of Disbursement sewer and water	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. City of Winston Salem		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address PO Box 2756		Amount of Each Disbursement this Period 41.54 Transaction ID : D423784
City Winston Salem	State NC	
Zip Code 27102-2756	Purpose of Disbursement sewer and water 9/14 to 11/12	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1757.29
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Cogent Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 389 N Green St		Amount of Each Disbursement this Period 2100.00 Transaction ID : D420162
City Winston Salem	State NC	
Zip Code 27101-2772	Purpose of Disbursement campaign manager	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Cogent Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 389 N Green St		Amount of Each Disbursement this Period 900.00 Transaction ID : D420163
City Winston Salem	State NC	
Zip Code 27101-2772	Purpose of Disbursement Fee Fundraising Mgr	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 1085 Hanes Mall Blvd		Amount of Each Disbursement this Period 28.53 Transaction ID : D420139
City Winston Salem	State NC	
Zip Code 27103-1310	Purpose of Disbursement office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3028.53
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1085 Hanes Mall Blvd		Amount of Each Disbursement this Period 134.25 Transaction ID : D421636
City Winston Salem	State NC	
Zip Code 27103-1310	Purpose of Disbursement postage for fundraising	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 1090		Amount of Each Disbursement this Period 71.80 Transaction ID : D423437
City Charlotte	State NC	
Zip Code 28201-1090	Purpose of Disbursement electric bill 10/24	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Empire Printing and Graphics, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 2400 W Clemmons Rd Ste 300		Amount of Each Disbursement this Period 1574.25 Transaction ID : D420135
City Winston Salem	State NC	
Zip Code 27127-8783	Purpose of Disbursement yard signs and stakes	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1780.30
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Facebook Ad		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 20.88
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising on line	Transaction ID : D422059
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook Ad		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 25.79
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement facebook ads 10/31 to 11/05	Transaction ID : D423428
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook Ad		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 154.99
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement facebook ads 11/5 to 11/06	Transaction ID : D423429
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	201.66
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Facebook Ad		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 153.34 Transaction ID : D423430
City Menlo Park	State CA	
Purpose of Disbursement facebook ads 11/06 to 11/07		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Google.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address Unknow Street		Amount of Each Disbursement this Period 100.00 Transaction ID : D423431
City Mountain View	State CA	
Purpose of Disbursement ads on google		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Google.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address Unknow Street		Amount of Each Disbursement this Period 100.00 Transaction ID : D422058
City Mountain View	State CA	
Purpose of Disbursement Adverting on line		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	353.34
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Home Real Estate Co.		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 100 S Marshall St		Amount of Each Disbursement this Period 795.00 Transaction ID : D420167
City Winston Salem	State NC	
Zip Code 27101-2843	Purpose of Disbursement November rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jacelyn Hunt		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 6429 Blake Road		Amount of Each Disbursement this Period 500.00 Transaction ID : D420165
City Stedman	State NC	
Zip Code 28391	Purpose of Disbursement campus coordinator Appilation State	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Intuit, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 2800 E Commerce Center Pl		Amount of Each Disbursement this Period 21.56 Transaction ID : D420805
City Tucson	State AZ	
Zip Code 85706-4559	Purpose of Disbursement monthly fee for software use QB	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1316.56
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Kilpatrick Designs, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 330 Staffordshire Road			Amount of Each Disbursement this Period 1200.00 Transaction ID : D421638
City Winston Salem	State NC	Zip Code 27104	
Purpose of Disbursement campaign designs		Candidate Name	Category/ Type 006
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Krispy Kreme			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 259 S Stratford Rd			Amount of Each Disbursement this Period 26.66 Transaction ID : D423785
City Winston Salem	State NC	Zip Code 27103-1817	
Purpose of Disbursement donuts and coffee for poll greeters		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Mailtricity			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 9314 Forest Hill Blvd. Suite# 24			Amount of Each Disbursement this Period 3000.00 Transaction ID : D421693
City West Palm Beach	State FL	Zip Code 33411	
Purpose of Disbursement email blast until election day		Candidate Name	Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4226.66
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 135.85 Transaction ID : D422056
City Walkertown	State NC	
Zip Code 27051-9426	Purpose of Disbursement milage to deliver campaign material	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 106.55 Transaction ID : D421645
City Walkertown	State NC	
Zip Code 27051-9426	Purpose of Disbursement reimburse for milage campaign	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 800.00 Transaction ID : D420164
City Walkertown	State NC	
Zip Code 27051-9426	Purpose of Disbursement campus director 4th installment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1042.40
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 121.00 Transaction ID : D420142
City Walkertown	State NC	
Purpose of Disbursement reimburse for travel milage w/e 10/22		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 60.50 Transaction ID : D423744
City Walkertown	State NC	
Purpose of Disbursement milage to pu signs after election		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. John K Motsinger Jr		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 6548 Woodmere Dr		Amount of Each Disbursement this Period 133.32 Transaction ID : D423753
City Walkertown	State NC	
Purpose of Disbursement deliver signs for election day		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	314.82
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 550.00 Transaction ID : D423432
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement monthly fee for software use 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 500.00 Transaction ID : D423424
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement robo calls 11/1 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 95.24 Transaction ID : D423425
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement robo calls 11/5/12 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1145.24
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 365.28
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement robo calls 11/5/12	Category/Type 004	Transaction ID : D423426
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 530.33
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement robo calls 11/06	Category/Type 004	Transaction ID : D423427
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1500.00
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement robo calls	Category/Type 001	Transaction ID : D420141
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2395.61
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 500.00 Transaction ID : D421775
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement robo calls	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Our Daily Bread		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 627 W King St		Amount of Each Disbursement this Period 14.41 Transaction ID : D420143
City Boone	State NC Zip Code 28607	
Purpose of Disbursement food while campaigning	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piedmont Natural Gas		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 2300 Lowery St		Amount of Each Disbursement this Period 25.11 Transaction ID : D418911
City Winston Salem	State NC Zip Code 27101-4723	
Purpose of Disbursement NATURAL GAS 10/06	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	539.52
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Piedmont Natural Gas		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 2300 Lowery St		Amount of Each Disbursement this Period 66.64 Transaction ID : D423760
City Winston Salem	State NC	
Zip Code 27101-4723	Purpose of Disbursement natural gas 11/14 reading	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Public Policy Poling		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 2912 Highwoods Blvd		Amount of Each Disbursement this Period 2000.00 Transaction ID : D422055
City Raleigh	State NC	
Zip Code 27604-1003	Purpose of Disbursement Polling	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Senor Brovo Mexican Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 241 S Marshall St		Amount of Each Disbursement this Period 190.00 Transaction ID : D420811
City Winston Salem	State NC	
Zip Code 27101-5250	Purpose of Disbursement food for fundraiser	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2256.64
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Subway		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 36 Forest Hill Road		Amount of Each Disbursement this Period 18.86 Transaction ID : D424025
City Lexington	State NC Zip Code 27295	
Purpose of Disbursement food for campaign wkers on road	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Subway		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012
Mailing Address 1735 Statesville Blvd		Amount of Each Disbursement this Period 14.22 Transaction ID : D424026
City Cleveland	State NC Zip Code 27013	
Purpose of Disbursement food for campaign wkers when on road	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sun printing Company, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 1411 S Main St		Amount of Each Disbursement this Period 570.05 Transaction ID : D421627
City Winston Salem	State NC Zip Code 27127-2705	
Purpose of Disbursement Campaign Handouts	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	603.13
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Sylvester Management		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address PO Box 986		Amount of Each Disbursement this Period 15.00 Transaction ID : D423434
City Immo	State SC Zip Code 29063-0986	
Purpose of Disbursement webinar roundtable 11/14	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Taste Full Beans		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 29 2nd Street		Amount of Each Disbursement this Period 22.60 Transaction ID : D420150
City Hickory	State NC Zip Code 28601	
Purpose of Disbursement expenses at Meet and Greet	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 13840 Ballantyne Corporate Place		Amount of Each Disbursement this Period 1013.00 Transaction ID : D421774
City Charlotte	State NC Zip Code 28277-1234	
Purpose of Disbursement Cable ads 11/01 to 11/05	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1050.60
TOTAL 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 50			
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 13840 Ballantyne Corporate Place		Amount of Each Disbursement this Period 1700.00 Transaction ID : D421640
City Charlotte	State NC Zip Code 28277-1234	
Purpose of Disbursement Cable advertising 10/22 to 11/04	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 13840 Ballantyne Corporate Place		Amount of Each Disbursement this Period 150.00 Transaction ID : D420797
City Charlotte	State NC Zip Code 28277-1234	
Purpose of Disbursement on line production for ads	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 13840 Ballantyne Corporate Place		Amount of Each Disbursement this Period 2301.00 Transaction ID : D420799
City Charlotte	State NC Zip Code 28277-1234	
Purpose of Disbursement Cable advertising 10/26 to 11/05	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4151.00
TOTAL 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 41 OF 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 13840 Ballantyne Corporate Place		Amount of Each Disbursement this Period 159.85 Transaction ID : D423400
City Charlotte	State NC Zip Code 28277-1234	
Purpose of Disbursement internet and phone 11/12 to 12/12	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Tropical Smoothie		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 216 W 4th St		Amount of Each Disbursement this Period 177.35 Transaction ID : D423440
City Winston Salem	State NC Zip Code 27101	
Purpose of Disbursement food for workers at election day	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Whole Foods Market		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 41 Miller St		Amount of Each Disbursement this Period 15.35 Transaction ID : D421637
City Winston Salem	State NC Zip Code 27104-4211	
Purpose of Disbursement cleaning supplies	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	352.55
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Yadkin Christian Ministries		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 112 W Elm St		Amount of Each Disbursement this Period 60.00 Transaction ID : D421633
City Yadkinville	State NC	
Purpose of Disbursement Tickets to Empty Bowl In Yadkin		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Caron Armstrong		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 1728 Round Hill Cir		Amount of Each Disbursement this Period 60.48 Transaction ID : D423438
City Kernersville	State NC	
Purpose of Disbursement reimburse for supplies election day		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 1085 Hanes Mall Blvd		Amount of Each Disbursement this Period 60.48 Transaction ID : D423439 [MEMO ITEM]
City Winston Salem	State NC	
Purpose of Disbursement supplies for election day		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	120.48
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Elisabeth Motsinger		Date of Disbursement MM / DD / YYYY 11 / 19 / 2012
Mailing Address 6548 Woodmere Drive		Amount of Each Disbursement this Period 66.28 Transaction ID : D423777
City Walkertown State NC Zip Code 27051-9426	Purpose of Disbursement food elec day donation to RC, copy paper Category/Type 001	
Candidate Name Elisabeth Motsinger	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 05		

Full Name (Last, First, Middle Initial) B. American Red Cross		Date of Disbursement MM / DD / YYYY 11 / 19 / 2012
Mailing Address 2025 E Street		Amount of Each Disbursement this Period 5.00 Transaction ID : D423783 [MEMO ITEM]
City Washington State DC Zip Code 20006	Purpose of Disbursement Donation to Hurrican Disaster Category/Type 012	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Costco Wholesale		Date of Disbursement MM / DD / YYYY 11 / 19 / 2012
Mailing Address 1085 Hanes Mall Blvd		Amount of Each Disbursement this Period 14.50 Transaction ID : D423780 [MEMO ITEM]
City Winston Salem State NC Zip Code 27103-1310	Purpose of Disbursement copy paper Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	66.28
TOTAL 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 50	
	<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)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 1085 Hanes Mall Blvd		Amount of Each Disbursement this Period 46.78
City Winston Salem	State NC	
Zip Code 27103-1310	Purpose of Disbursement food for election day	Transaction ID : D423781
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. GODADDY.com, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 14455 N Hayden Rd Ste 226		Amount of Each Disbursement this Period 315.05
City Scottsdale	State AZ	
Zip Code 85260-6993	Purpose of Disbursement domains names for 2 years	Transaction ID : D424745
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		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		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	315.05
TOTAL This Period (last page this line number only).....	28409.62

**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 50			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 6.74
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Service Fee	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 58.65
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Service Fee	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 30.60
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Service Fee	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	95.99
TOTAL 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 50	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Elisabeth Motsinger for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 15.22
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Transaction ID : D423150
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) 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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15.22
TOTAL This Period (last page this line number only).....	111.21

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L799

Elisabeth Motsinger for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

John Kings MotsingerSr PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

6548 Woodmere Dr

City

State

ZIP Code

Walkertown

NC

27051-9426

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M 03 / D 13 / Y 2012 Y

Date Due

M / D / Y no due date Y

Interest Rate

none % (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:

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

2000.00

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

2000.00

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

NAME OF COMMITTEE (In Full)

Elisabeth Motsinger for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor I. M. Anonymous		Nature of Debt (Purpose): Disputed claim from alleged contractor
Mailing Address P. O. Box 25121		
City State Zip Code Winston Salem NC 27114-5121		

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : D388694	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2500.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="2500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="2000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4500.00"/>

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @`CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : D388694

Claimant was associated with the campaign during the primary period. The campaign and the claimant terminated the relationship. A dispute has arisen over the value of the services, whether the services were properly performed, and whether any contractual relationship existed between the parties. The inclusion of \$2500 is the estimated amount we understand the claimant demands and not an admission by the committee that any amount is due to claimant. Claimant listed as anonymous due to nature of relationship between the parties and the expectation of privacy inherent in that relationship. Committee reserves the right to assert additional claims against the claimant not listed above if the claim results in litigation. The failure to enumerate those claims here does not constitute a waiver of them,

Form/Schedule:

Transaction ID:

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Elisabeth Motsinger for Congress		Report Covering Period: From: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">M M M</td><td style="padding: 2px;">/</td><td style="padding: 2px;">D D D</td><td style="padding: 2px;">/</td><td style="padding: 2px;">Y Y Y Y Y Y</td></tr><tr><td style="text-align: center;">10</td><td></td><td style="text-align: center;">18</td><td></td><td style="text-align: center;">2012</td></tr></table> To: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">M M M</td><td style="padding: 2px;">/</td><td style="padding: 2px;">D D D</td><td style="padding: 2px;">/</td><td style="padding: 2px;">Y Y Y Y Y Y</td></tr><tr><td style="text-align: center;">11</td><td></td><td style="text-align: center;">26</td><td></td><td style="text-align: center;">2012</td></tr></table>					M M M	/	D D D	/	Y Y Y Y Y Y	10		18		2012	M M M	/	D D D	/	Y Y Y Y Y Y	11		26		2012
M M M	/	D D D	/	Y Y Y Y Y Y																						
10		18		2012																						
M M M	/	D D D	/	Y Y Y Y Y Y																						
11		26		2012																						
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees																							
A	Elisabeth Motsinger for Congress	10363.00	1000.00																							
B	Column Total Last Page Only.....	10363.00	1000.00																							
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans																				
A	0.00	0.00	11363.00	0.00	0.00	0.00																				
B	0.00	0.00	11363.00	0.00	0.00	0.00																				
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees																				
A	0.00	75.00	0.00	11438.00	28409.62	0.00																				
B	0.00	75.00	0.00	11438.00	28409.62	0.00																				
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees																				
A	0.00	0.00	0.00	0.00	0.00	0.00																				
B	0.00	0.00	0.00	0.00	0.00	0.00																				
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee																				
A	0.00	111.21	28520.83	26594.75	9511.92	0.00																				
B	0.00	111.21	28520.83	26594.75	9511.92	0.00																				
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures																							
A	4500.00	11363.00	28334.62																							
B	4500.00	11363.00	28334.62																							