

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 2267  
 Check if different than previously reported. (ACC) Smithfield NC 27577

2. **FEC IDENTIFICATION NUMBER** C C00501643 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
NC 07

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

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
07 / 01 / 2012 through 09 / 30 / 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 Heather Ford  
Signature of Treasurer Heather Ford *[Electronically Filed]* Date M M / D D / Y Y Y Y  
10 / 15 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**David Rouzer for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 09 / 30 / 2012

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 340664.81               | 1036017.65                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 5886.91                 | 10086.91                           |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 334777.90               | 1025930.74                         |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 431624.31               | 950544.43                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 128.30                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 431624.31               | 950416.13                          |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 91895.43                |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 75742.79                |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**David Rouzer for Congress**

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

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                    |
| (i) Itemized (use Schedule A).....  | 236982.35                     | 736026.34                          |
| (ii) Unitemized.....  | 14493.26                      | 56765.86                           |
| (iii) TOTAL of contributions from individuals ▶   | 251475.61                     | 792792.20                          |
| (b) Political Party Committees.....   | 1792.48                       | 6792.48                            |
| (c) Other Political Committees (such as PACs).....  | 81900.00                      | 212017.15                          |
| (d) The Candidate.....  | 5496.72                       | 24415.82                           |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..              | 340664.81                     | 1036017.65                         |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....  | 17133.41                      | 17133.41                           |
| 13. LOANS:  |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....  | 0.00                          | 0.00                               |
| (b) All Other Loans.....  | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....  | 0.00                          | 0.00                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....                                | 0.00                          | 128.30                             |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.).....   | 0.00                          | 0.00                               |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 357798.22                     | 1053279.36                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 431624.31                     | 950544.43                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 5386.91                       | 8486.91                            |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 500.00                        | 1600.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 5886.91                       | 10086.91                           |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 752.59                             |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 437511.22                     | 961383.93                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 171608.43 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 357798.22 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 529406.65 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 437511.22 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 91895.43  |

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

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

FOR LINE NUMBER: PAGE 5 OF 261  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 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)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN ADKINS**

Mailing Address **PO BOX 328**

City **SMITHFIELD** State **NC** Zip Code **27577-0328**

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 **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 10 / 2012**

**Transaction ID : SA11.2690**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JACK ALPHIN**

Mailing Address **519 BETHEL CHURCH RD**

City **MOUNT OLIVE** State **NC** Zip Code **28365-6107**

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

Name of Employer **ALPHIN FARMS** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 09 / 2012**

**Transaction ID : SA11.2704**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JULIAN R. AYCOCK**

Mailing Address **924 AYCOCK DAIRY FARM ROAD**

City **FREMONT** State **NC** Zip Code **27830-9015**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2914**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1000.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD S. BARCLAY JR.**

Mailing Address 4 PIPERS NECK ROAD

City: WILMINGTON State: NC Zip Code: 28411-9239

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: REAL ESTATE BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3500.00

Date of Receipt: 08 / 16 / 2012

**Transaction ID : SA11.2877**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRENDA BARKER**

Mailing Address 309 BRADLEY DRIVE

City: WILMINGTON State: NC Zip Code: 28409-2001

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: 1000.00

Date of Receipt: 08 / 08 / 2012

**Transaction ID : SA11.2812**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**C. WILLIAM BARKER**

Mailing Address 309 BRADLEY DRIVE

City: WILMINGTON State: NC Zip Code: 28409-2001

FEC ID number of contributing federal political committee: C

Name of Employer: BARKER JONES & CO. Occupation: CPA/GFF, CFE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 07 / 17 / 2012

**Transaction ID : SA11.2674**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

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

3000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 7 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GREGORY GUY BARNES**

Mailing Address 3788 BULL STREET

City State Zip Code  
GARLAND NC 28441-9002

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : SA11.3040**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER H. BARNHILL**

Mailing Address 582 BARNHILL BLUEBERRY LANCE

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : SA11.3049**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CLAUDIA H. BARNHILL**

Mailing Address 18221 NC 210 HIGHWAY E

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SWEET BERRY FARMS, LLC BLUEBERRY PRODUCER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : SA11.2729**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

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

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

3750.00

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CLAUDIA H. BARNHILL**

Mailing Address 18221 NC 210 HIGHWAY E

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SWEET BERRY FARMS, LLC BLUEBERRY PRODUCER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11.3358**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHESTER S. BARNHILL**

Mailing Address 18221 NC 210 HIGHWAY E

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SWEET BERRY FARMS, LLC BLUEBERRY PRODUCER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11.3359**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**CLAUDIA H. BARNHILL**

Mailing Address 18221 NC 210 HIGHWAY E

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SWEET BERRY FARMS, LLC BLUEBERRY PRODUCER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11.3358B**

Amount of Each Receipt this Period  
-2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

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

2500.00



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

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

FOR LINE NUMBER: PAGE 9 OF 261  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W. KIAH BARNHILL**

Mailing Address 19446 NC HWY 210 E

City State Zip Code  
IVANHOE NC 28447-8924

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

Name of Employer Occupation  
SELF EMPLOYED BLUEBERRY FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 07 2012

**Transaction ID : SA11.3052**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALBAN K. BARRUS**

Mailing Address PO BOX 218

City State Zip Code  
KINSTON NC 28502-0218

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 19 2012

**Transaction ID : SA11.3252**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PAULA BASSO**

Mailing Address 1345 REGATTA DRIVE

City State Zip Code  
WILMINGTON NC 28405-4269

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 22 2012

**Transaction ID : SA11.2890**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1750.00

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GORDON H. BATES**

Mailing Address 12918 CRESTMOOR CIRCLE

City PROSPECT State KY Zip Code 40059-8116

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

Name of Employer BATES CAPITOL GROUP Occupation LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11.3156**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KEITH M. BEATTY**

Mailing Address 1120 ULLSWATER LANE

City WILMINGTON State NC Zip Code 28405-4385

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

Name of Employer INTRACOASTAL REALTY Occupation REALTOR

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  
 09 / 27 / 2012

**Transaction ID : SA11.3207**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRENDA L. BECKER**

Mailing Address 8214 MACK ST

City ALEXANDRIA State VA Zip Code 22308-1653

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

Name of Employer BOSTON SCIENTIFIC Occupation SENIOR VICE PRESIDENT

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  
 08 / 28 / 2012

**Transaction ID : SA11.2972**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**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 11 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRIDGET H. BENDER**

Mailing Address 2940 PINE VALLEY DRIVE

City State Zip Code  
MIRAMAR BEACH FL 32550-7836

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2012

**Transaction ID : SA11.2969**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MIKE BENDER**

Mailing Address 2940 PINE VALLEY DRIVE

City State Zip Code  
MIRAMAR BEACH FL 32550-7836

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

Name of Employer Occupation  
VELOCITY SOLUTIONS DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2012

**Transaction ID : SA11.2968**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMANDA B. BENTON**

Mailing Address 19221 NC 210 HIGHWAY EAST

City State Zip Code  
IVANHOE NC 28447

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 07 / 2012

**Transaction ID : SA11.3028**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

5250.00

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TIMOTHY G. BLOUNT**

Mailing Address 63 JOHNSTON ST.

City State Zip Code  
ELIZABETHTOWN NC 28337-6258

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
4G GROUP PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2938**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN W. BODE**

Mailing Address 28389 CATALPA POINT ROAD

City State Zip Code  
EASTON MD 21601-8579

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
OLSSON, FRANK, WEEDA ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3186**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH R. BOLOGNA**

Mailing Address 117 NORTH ROCKFISH STREET

City State Zip Code  
WALLACE NC 28466-2917

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
JOSEPH R. BOLOGNA, DMD PLLC DENTIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3069**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 13 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH LANDON BORDEAUX**

Mailing Address 3473 OWEN HILL ROAD

City State Zip Code  
ELIZABETHTOWN NC 28337-5127

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

Name of Employer Occupation  
CLC FINANCIAL SERVICES AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 03 / 2012**

**Transaction ID : SA11.2792**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOSEPH LANDON BORDEAUX**

Mailing Address 3473 OWEN HILL ROAD

City State Zip Code  
ELIZABETHTOWN NC 28337-5127

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

Name of Employer Occupation  
CLC FINANCIAL SERVICES AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3360**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JEAN BOSEMAN**

Mailing Address RT 2 BOX 122B

City State Zip Code  
BATTLEBORO NC 27809-9734

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

Name of Employer Occupation  
BOSEMAN FARMS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 04 / 2012**

**Transaction ID : SA11.3357**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1200.00**

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 14 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WAYNE R. BOYLES III**

Mailing Address **5811 WESEX LANE**

City **ALEXANDRIA** State **VA** Zip Code **22310-1428**

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

Name of Employer **THE BOYLES COMPANY, INC.** Occupation **PRESIDENT**

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  
**07 / 09 / 2012**

**Transaction ID : SA11.2705**

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

**B.** Full Name (Last, First, Middle Initial)  
**W. STEPHEN BRIGHT**

Mailing Address **333 FOLLY ISLAND COURT**

City **WILMINGTON** State **NC** Zip Code **28411-8733**

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

Name of Employer **TALBERT & BRIGHT, INC.** Occupation **ENGINEER**

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  
**09 / 27 / 2012**

**Transaction ID : SA11.3204**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LYNN BRISSON**

Mailing Address **PO BOX 844**

City **ELIZABETHTOWN** State **NC** Zip Code **28337-0844**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : SA11.3037**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1600.00**

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LINWOOD P. BRITTON JR.**

Mailing Address **4605 S. VIRGINIA DARE TRAIL**

City **NAGS HEAD** State **NC** Zip Code **27959-9293**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3020**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALVIN B. BROWN**

Mailing Address **217 DANIEL DRIVE**

City **BOONE** State **NC** Zip Code **28607-6013**

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

Name of Employer **NC STATE UNIVERSITY** Occupation **PROFESSOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2012**

**Transaction ID : SA11.3119**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRUCE B. CAMERON**

Mailing Address **PO BOX 3649**

City **WILMINGTON** State **NC** Zip Code **28406-0649**

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  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 16 / 2012**

**Transaction ID : SA11.2884**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

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

**3750.00**

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRUCE B. CAMERON**

Mailing Address **PO BOX 3649**

City **WILMINGTON** State **NC** Zip Code **28406-0649**

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 **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 16 / 2012**

**Transaction ID : SA11.2885**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRUCE B. CAMERON IV**

Mailing Address **PO BOX 3649**

City **WILMINGTON** State **NC** Zip Code **28406-0649**

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

Name of Employer **CAMERON COMPANIES** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11.3179**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRUCE B. CAMERON IV**

Mailing Address **PO BOX 3649**

City **WILMINGTON** State **NC** Zip Code **28406-0649**

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

Name of Employer **CAMERON COMPANIES** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11.3180**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

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

**5500.00**



**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LOUIS C. CAMILLERI**

Mailing Address 120 PARK AVE., FLOOR 6

City NEW YORK State NY Zip Code 10017-5579

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

Name of Employer PHILLIP MORRIS INTERNATIONAL, INC. Occupation CHAIRMAN AND CEO

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  
 09 / 14 / 2012

**Transaction ID : SA11.3096**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JENNIFER L. CAMPBELL**

Mailing Address 48 MORGAN WOOD ESTATES DR.

City ELIZABETHTOWN State NC Zip Code 28337-9026

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

Name of Employer UNEMPLOYED Occupation REGISTERED NURSE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11.3053**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TIMOTHY CANSLER**

Mailing Address 1738 DANA STREET

City CROFTON State MD Zip Code 21114-1409

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

Name of Employer CANSLER & VEN Occupation VP & COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : SA11.2783**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1000.00

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM J. CARONE**

Mailing Address 155 AZALEA LANE

City WALLACE State NC Zip Code 28466-9271

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

Name of Employer Occupation  
BILL CARONE CHEVROLET AUTO SALES

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11.3054**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SONYA B. CARTER**

Mailing Address 6504 US 701 HWY N.

City ELIZABETHTOWN State NC Zip Code 28337-6302

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

Name of Employer Occupation  
CARTER FARMS BLUEBERRY GROWER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : SA11.2939**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN STEVEN CASHWELL**

Mailing Address 828 INLET VIEW DR.

City WILMINGTON State NC Zip Code 28409-2106

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

Name of Employer Occupation  
VAN EDEN FARMS, INC. FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11.3213**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

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

1750.00

**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 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICK CATLIN**

Mailing Address **PO BOX 10279**

City **WILMINGTON** State **NC** Zip Code **28404-0279**

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

Name of Employer **CATLIN ENGINEERS & SCIENTISTS** Occupation **ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3142**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN F. CHANEY**

Mailing Address **305 VISTAMAR DRIVE**

City **WILMINGTON** State **NC** Zip Code **28405-4780**

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

Name of Employer **JOHN F. CHANEY CONSTRUCTION** Occupation **CONTRACTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3139**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROGERS HOWELL CLARK JR**

Mailing Address **PO BOX 953**

City **ELIZABETHTOWN** State **NC** Zip Code **28337-0953**

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

Name of Employer **SAMPSON-BLADEN OIL COMPANY, INC.** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : SA11.3048**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**2000.00**

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 20 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>MARY MARGARET CLIFTON</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2012 |  |
| Mailing Address 720 CAMPBELL ROAD   |                                  | <b>Transaction ID : SA11.3051</b>                            |  |
| City<br>CLARKTON  | State<br>NC                      | Zip Code<br>28433-8634                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER          |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>TIMOTHY L. CLIFTON</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2012 |  |
| Mailing Address PO BOX 1308   |                                   | <b>Transaction ID : SA11.3038</b>                            |  |
| City<br>ELIZABETHTOWN   | State<br>NC                       | Zip Code<br>28337-1308                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00                 |  |
| Name of Employer<br>BIG BLUE STORE  | Occupation<br>GENERAL MANAGER     |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1850.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>PAUL Y. COBLE</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 23 / 2012 |  |
| Mailing Address 2412 TYSON ST.  |                                  | <b>Transaction ID : SA11.2953</b>                            |  |
| City<br>RALEIGH   | State<br>NC                      | Zip Code<br>27612-4729                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |  |
| Name of Employer<br>COBLE, NICHOLSON & ASSOCIATION  | Occupation<br>INSURANCE BROKER   |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |  |

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

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 21 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ERNEST BROCKMAN COGGINS**

Mailing Address 908 NORTH LEBANON STREET

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| ARLINGTON | VA    | 22205-1434 |

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

|                      |            |
|----------------------|------------|
| Name of Employer     | Occupation |
| UNITED STATES SENATE | DOORKEEPER |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2012

**Transaction ID : SA11.2753**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ERNEST BROCKMAN COGGINS**

Mailing Address 908 NORTH LEBANON STREET

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| ARLINGTON | VA    | 22205-1434 |

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

|                      |            |
|----------------------|------------|
| Name of Employer     | Occupation |
| UNITED STATES SENATE | DOORKEEPER |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2012

**Transaction ID : SA11.2932**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANNE H. COGHILL**

Mailing Address 4510 SAINT ANDREWS DRIVE, NORTH

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| WILSON | NC    | 27896-9166 |

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

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
| RETIRED          | RETIRED    |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11.3221**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1500.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 22 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARVIN W. COGHILL**

Mailing Address 4510 SAINT ANDREWS DRIVE, NORTH

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>WILSON | State<br>NC | Zip Code<br>27896-9166 |
|----------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11.3222**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANNE H. COGHILL**

Mailing Address 4510 SAINT ANDREWS DRIVE, NORTH

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>WILSON | State<br>NC | Zip Code<br>27896-9166 |
|----------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11.3247**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**MARVIN W. COGHILL**

Mailing Address 4510 STAIN T ANDREWS DRIVE, NORTH

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>WILSON | State<br>NC | Zip Code<br>27896-9166 |
|----------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11.3222B**

Amount of Each Receipt this Period  
 -1000.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

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

1000.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 23 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT EDWARD COKER**

Mailing Address 17212 GULF PINE CIRCLE

City Wellington State FL Zip Code 33414-6360

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

Name of Employer UNITED STATES SUGAR CORPORATION Occupation SENIOR VICE PRESIDENT PUBLIC AFFAIRS

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  
 08 / 07 / 2012

**Transaction ID : SA11.2807**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT G. COLLINS JR.**

Mailing Address 1005 BAY BRANCH CIRCLE

City WILMINGTON State NC Zip Code 28405-4034

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

Name of Employer COLLINS & COLLINS LAW OFFICES Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
255.44

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2012

**Transaction ID : SA11.2741**

Amount of Each Receipt this Period  
 118.44  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PAUL D. COLVIN**

Mailing Address 1701 S. MORNINGS DR.

City WILMINGTON State NC Zip Code 28405

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

Name of Employer PPD Occupation EXECUTIVE VICE PRESIDENT

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  
 08 / 23 / 2012

**Transaction ID : SA11.2905**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

868.44

**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 24 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES F. CONNER**

Mailing Address 310 MANSION DRIVE

City: ALEXANDRIA State: VA Zip Code: 22302-2903

FEC ID number of contributing federal political committee: C

Name of Employer: NATIONAL COUNCIL OF FARMER COOPERA Occupation: PRESIDENT & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 09 / 01 / 2012

**Transaction ID : SA11.3154**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. COOMER**

Mailing Address PO BOX 46325

City: RALEIGH State: NC Zip Code: 27620-6325

FEC ID number of contributing federal political committee: C

Name of Employer: INFINITY FIRE PROTECTION Occupation: SALES MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1050.00

Date of Receipt: 08 / 23 / 2012

**Transaction ID : SA11.2903**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. COOMER**

Mailing Address PO BOX 46325

City: RALEIGH State: NC Zip Code: 27620-6325

FEC ID number of contributing federal political committee: C

Name of Employer: INFINITY FIRE PROTECTION Occupation: SALES MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1050.00

Date of Receipt: 09 / 27 / 2012

**Transaction ID : SA11.3202**

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

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

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

1300.00



**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 25 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>JOHN J. COOPER</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 22 / 2012 |
| Mailing Address 329 BAY TREE LANE   |                                   | <b>Transaction ID : SA11.2821</b>                            |
| City<br>RALEIGH   | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>COMPASS NC  | Occupation<br>CONSULTANT          | CONTRIBUTION   |
| Receipt For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>4500.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>JOHN J. COOPER</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 23 / 2012 |
| Mailing Address 329 BAY TREE LANE   |                                   | <b>Transaction ID : SA11.2963</b>                            |
| City<br>RALEIGH   | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1500.00                |
| Name of Employer<br>COMPASS NC  | Occupation<br>CONSULTANT          | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>4500.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>JOHN J. COOPER</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 28 / 2012 |
| Mailing Address 329 BAY TREE LANE   |                                   | <b>Transaction ID : SA11.3311</b>                            |
| City<br>RALEIGH   | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>COMPASS NC  | Occupation<br>CONSULTANT          | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>4500.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 26 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD E. CRABTREE JR**

Mailing Address 320 GOLF VIEW DRIVE

City GREENVILLE State NC Zip Code 27834-7536

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

Name of Employer SELF EMPLOYED Occupation TECHNICAL WRITER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.3104**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NICHOLAS CRABTREE**

Mailing Address PO BOX 7203

City GREENVILLE State NC Zip Code 27835-7203

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

Name of Employer CRABWORKS Occupation WHOLESALE DISTRIBUTOR

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  
 08 / 28 / 2012

**Transaction ID : SA11.2954**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN R. CRALLE**

Mailing Address 1232 PEMBROKE JONES DRIVE

City WILMINGTON State NC Zip Code 28405-5202

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  
1850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2012

**Transaction ID : SA11.2673**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1750.00

**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 27 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R. CRALLE**

Mailing Address 1232 PEMBROKE JONES DRIVE

City: WILMINGTON State: NC Zip Code: 28405-5202

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: 1850.00

Date of Receipt: 08 / 08 / 2012

**Transaction ID : SA11.2810**

Amount of Each Receipt this Period: 200.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN R. CRALLE**

Mailing Address 1232 PEMBROKE JONES DRIVE

City: WILMINGTON State: NC Zip Code: 28405-5202

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: 1850.00

Date of Receipt: 08 / 23 / 2012

**Transaction ID : SA11.2893**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN R. CRALLE**

Mailing Address 1232 PEMBROKE JONES DRIVE

City: WILMINGTON State: NC Zip Code: 28405-5202

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: 1850.00

Date of Receipt: 09 / 27 / 2012

**Transaction ID : SA11.3214**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

950.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 28 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL CREED**

Mailing Address 10520 CLUBMONT LANE

City State Zip Code  
RALEIGH NC 27617-7580

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

Name of Employer Occupation  
MCKIM & CREED, PA ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11.3365**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT CHARLES DACEY**

Mailing Address 139 TRENT SHORES DR

City State Zip Code  
TRENT WOODS NC 28562-7741

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

Name of Employer Occupation  
CRAVEN COUNTY BOARD OF COMMISSIONERS VICE CHAIRMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2898**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**N. LEO DAUGHTRY**

Mailing Address PO BOX 1264

City State Zip Code  
SMITHFIELD NC 27577-1264

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

Name of Employer Occupation  
DAUGHTRY, WOODARD, LAWRENCE & STAFF ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2012

**Transaction ID : SA11.2695**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

2000.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 29 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRED B. DAVENPORT JR.**

Mailing Address 6612 SEDGEWOOD ROAD

City State Zip Code  
WILMINGTON NC 28403-3846

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

Name of Employer Occupation  
TAYLOR & GIBSON, LLC 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  
 09 / 06 / 2012

**Transaction ID : SA11.3021**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DIANNE DEANDRADE**

Mailing Address 6485 US HIGHWAY 701 N

City State Zip Code  
ELIZABETHTOWN NC 28337-6475

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

Name of Employer Occupation  
WHITE LAKE MARINE SALES MANAGER

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  
 08 / 24 / 2012

**Transaction ID : SA11.2940**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT DEGROOF**

Mailing Address 4013 NEWHALL COURT

City State Zip Code  
SOUTHPORT NC 28461-7504

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11.3109**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 30 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE C. DENBY**

Mailing Address 534 BEACH ROAD N

City State Zip Code  
WILMINGTON NC 28411-9214

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : SA11.3144**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES M. DEVANE JR.**

Mailing Address PO BOX 5

City State Zip Code  
ELIZABETHTOWN NC 28337-0005

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

Name of Employer Occupation  
DEVANE BUILDERS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2012

**Transaction ID : SA11.2712**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NANCY DIEFENTHAL**

Mailing Address 131 AIRLINE DRIVE, STE. 202

City State Zip Code  
METAIRIE LA 70001-6265

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 12 / 2012

**Transaction ID : SA11.3098**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

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

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

3250.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRYAN D. DIERLAM**

Mailing Address 122 7TH STREET, SE

City WASHINGTON State DC Zip Code 20003-1212

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

Name of Employer CARGILL Occupation DIRECTOR OF GOVERNMENTAL AFFAIRS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3376**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT DIXON**

Mailing Address P.O. BOX 2561

City SMITHFIELD State NC Zip Code 27577-2561

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  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11.2979**

Amount of Each Receipt this Period  
 750.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT J. DOLE**

Mailing Address 700 NEW HAMPSHIRE AVENUE, NW

City WASHINGTON State DC Zip Code 20037-2407

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

Name of Employer ALSTON & BIRD, LLP Occupation SPECIAL COUNSEL

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  
 08 / 03 / 2012

**Transaction ID : SA11.2796**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1000.00

**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 32 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANA LYNN DORNISIFE**

Mailing Address 417 CLIFFSIDE DRIVE

City DANVILLE State CA Zip Code 94526-4809

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

Name of Employer LAZAREX Occupation EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11.3176**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID DORNISIFE**

Mailing Address 417 CLIFFSIDE DRIVE

City DANVILLE State CA Zip Code 94526-4809

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

Name of Employer HERRICK CORPORATION Occupation MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11.3177**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES E. DOUTHIT**

Mailing Address 1200 TRILLIUM CIRCLE

City RALEIGH State NC Zip Code 27606-8109

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

Name of Employer SELF EMPLOYED Occupation APARTMENT OWNER/MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2012

**Transaction ID : SA11.2678**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

3250.00



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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 33 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MCKINLEY D. DULL**

Mailing Address **5 W ASHEVILLE ST.**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480-1889**

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

Name of Employer **MCKINLEY BUILDING CORP.** Occupation **BUILDER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3206**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY R. DUNN**

Mailing Address **7870 GODWIN LAKE ROAD**

City **DUNN** State **NC** Zip Code **28334-7727**

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

Name of Employer **CAROLINA FIRE PROTECTION, INC.** Occupation **SALES REP**

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  
**07 / 16 / 2012**

**Transaction ID : SA11.2722**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FRANCES H. EDWARDS**

Mailing Address **470 MELTON BRIDGE ROAD**

City **WHITAKERS** State **NC** Zip Code **27891-9256**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 04 / 2012**

**Transaction ID : SA11.3005**

Amount of Each Receipt this Period  
**750.00**  
 CONTRIBUTION

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

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

**2000.00**

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 34 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JUDY EDWARDS**

Mailing Address 5840 COFFEY STREET

City State Zip Code  
RALEIGH NC 27604-8661

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

Name of Employer Occupation  
NC GENERAL ASSEMBLY LEGISLATIVE ASSISTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2951**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MELVIN R. EDWARDS**

Mailing Address PO BOX 389

City State Zip Code  
PRINCETON NC 27569-0389

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

Name of Employer Occupation  
EDWARDS VINE & SONS INC. PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11.2867**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RANDY EDWARDS**

Mailing Address 2505 WENDELL ROAD

City State Zip Code  
WENDELL NC 27591-7475

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 09 / 2012

**Transaction ID : SA11.2843**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

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

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

950.00

**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 35 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT D. EDWARDS**

Mailing Address 2039 BELLAMY LAKE ROAD

City State Zip Code  
WHITAKERS NC 27891-9269

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3006**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FREDERIC N. ESHELMAN**

Mailing Address 300 NORTH 3RD STREET  
SUITE 110

City State Zip Code  
WILMINGTON NC 28401-4098

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PPD EXECUTIVE CHAIRMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2766**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HANK ESTEP**

Mailing Address 3213 SNOWBERRY COURT

City State Zip Code  
WILMINGTON NC 28409-6604

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
GRIFFIN ESTEP BENEFIT GROUP INC. INSURANCE AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2902**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 36 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HANK ESTEP**

Mailing Address 3213 SNOWBERRY COURT

City: WILMINGTON State: NC Zip Code: 28409-6604

FEC ID number of contributing federal political committee: C

Name of Employer: GRIFFIN ESTEP BENEFIT GROUP INC. Occupation: INSURANCE AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1319.28

Date of Receipt: 09 / 06 / 2012

**Transaction ID : SA11.3014**

Amount of Each Receipt this Period: 439.76

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HANK ESTEP**

Mailing Address 3213 SNOWBERRY COURT

City: WILMINGTON State: NC Zip Code: 28409-6604

FEC ID number of contributing federal political committee: C

Name of Employer: GRIFFIN ESTEP BENEFIT GROUP INC. Occupation: INSURANCE AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1319.28

Date of Receipt: 08 / 15 / 2012

**Transaction ID : SA11.3143**

Amount of Each Receipt this Period: 439.76

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VAN ELLEN EURE**

Mailing Address 10709 BEAVER POND LANE

City: RALEIGH State: NC Zip Code: 27614-9661

FEC ID number of contributing federal political committee: C

Name of Employer: ANGUS BARN Occupation: PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 850.00

Date of Receipt: 08 / 23 / 2012

**Transaction ID : SA11.2961**

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

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

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

979.52

**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 37 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROYCE E. EVERETTE JR.**

Mailing Address 118 ROBIN ROAD

City GREENVILLE State NC Zip Code 27858-8971

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

Name of Employer TIME INVESTMENT CORP Occupation CONSUMER FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : SA11.2854**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASHE B. EXUM**

Mailing Address 1701 SAINT GEORGE PLACE

City KINSTON State NC Zip Code 28504-2023

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

Name of Employer THE STAR TEAM Occupation REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3163**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DONALD E. FADER**

Mailing Address PO BOX 1376

City KINSTON State NC Zip Code 28503-1376

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

Name of Employer SMC HOME FINANCE Occupation MORTGAGE LENDER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : SA11.3023**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

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

1750.00

**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 38 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN C. FENNEBRESQUE**

Mailing Address 201 N TRYON ST., STE. 3000

City State Zip Code  
CHARLOTTE NC 28202-2146

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MCGUIRE WOODS ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3130**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RONALD C. FLEMING**

Mailing Address 1921 CLARKSVILLE DR.

City State Zip Code  
SCOTLAND NECK NC 27874-1427

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3276**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VINTON E. FOUNTAIN III**

Mailing Address 2909 HYDRANGEA PLACE

City State Zip Code  
WILMINGTON NC 28403-4015

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
FOUNTAIN FINANCIAL ASSOCIATES FINANCIAL PLANNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2850**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 39 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THEODORE M. FOWLER**

Mailing Address 13520 DURANT ROAD

City RALEIGH State NC Zip Code 27614-8321

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

Name of Employer GOLDEN CORRAL CORP Occupation EXECUTIVE

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  
 07 / 09 / 2012

**Transaction ID : SA11.2700**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBIN FREEMAN**

Mailing Address 93 EDEWATER LANE

City WILMINGTON State NC Zip Code 28403-3746

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

Name of Employer FREEMAN LANDSCAPE, INC Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2891**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALLEN E. GANT JR.**

Mailing Address 1022 W DAVIS STREET

City BURLINGTON State NC Zip Code 27215-3605

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

Name of Employer GLENN-RAVEN MILLS Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11.3002**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

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

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

3500.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 40 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ALLEN E. GANT JR.**

Mailing Address 1022 W DAVIS STREET

City BURLINGTON State NC Zip Code 27215-3605

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

Name of Employer GLENN-RAVEN MILLS Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11.3002B**

Amount of Each Receipt this Period  
-500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**ALLEN E. GANT JR.**

Mailing Address 1022 W DAVIS STREET

City BURLINGTON State NC Zip Code 27215-3605

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

Name of Employer GLENN-RAVEN MILLS Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11.3430**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**ALLEN E. GANT JR.**

Mailing Address 1022 W DAVIS STREET

City BURLINGTON State NC Zip Code 27215-3605

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

Name of Employer GLENN-RAVEN MILLS Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11.3003**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

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

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

2000.00



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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 41 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK B. GIBSON JR.**

Mailing Address 2220 PARHAM DRIVE

City: WILMINGTON State: NC Zip Code: 28403-6034

FEC ID number of contributing federal political committee: C

Name of Employer: MURCHISON, TAYLOR & GIBSON Occupation: LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 950.00

Date of Receipt: 08 / 16 / 2012

**Transaction ID : SA11.2878**

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN D. GILLIS**

Mailing Address 2701 GILLIS HILL ROAD

City: FAYETTEVILLE State: NC Zip Code: 28306-8209

FEC ID number of contributing federal political committee: C

Name of Employer: GILLIS HILL FARM Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 07 / 05 / 2012

**Transaction ID : SA11.2667**

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MOLLIE GLENN**

Mailing Address PO BOX 597

City: ELIZABETHTOWN State: NC Zip Code: 28337-0597

FEC ID number of contributing federal political committee: C

Name of Employer: FIRST COMMUNITY BANK Occupation: BANKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 12 / 2012

**Transaction ID : SA11.3071**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

400.00

**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 42 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHANNING GOODEN**

Mailing Address 689 DEWITT GOODEN ROAD

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>ELIZABETHTOWN | State<br>NC | Zip Code<br>28337-5359 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee.

|                                  |                      |
|----------------------------------|----------------------|
| Name of Employer<br>GOODEN FARMS | Occupation<br>FARMER |
|----------------------------------|----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3047**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PATRICIA M. GOODEN**

Mailing Address 959 DEWITT GOODEN ROAD

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>ELIZABETHTOWN | State<br>NC | Zip Code<br>28337-5369 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee.

|   |                      |
|---|----------------------|
| Name of Employer<br>BENNETT PLACE NURSERY | Occupation<br>FARMER |
|---|----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3046**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS COWART GOOLSBY**

Mailing Address 212 WALNUT STREET, STE. 100

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WILMINGTON | State<br>NC | Zip Code<br>28401-4254 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee.

|  |                        |
|--|------------------------|
| Name of Employer<br>GOOLSBY LAW FIRM, PLLC | Occupation<br>ATTORNEY |
|--|------------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3146**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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:<br>(check only one)   | PAGE 43 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK D. GORHAM III**

Mailing Address 142 BEACH ROAD SOUTH

City: WILMINGTON State: NC Zip Code: 28411-9222

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

Name of Employer: SANDSTONE PROPERTIES, LLC Occupation: INVESTMENTS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 08 / 2012

**Transaction ID : SA11.2811**

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRANK D. GORHAM III**

Mailing Address 142 BEACH ROAD SOUTH

City: WILMINGTON State: NC Zip Code: 28411-9222

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

Name of Employer: SANDSTONE PROPERTIES, LLC Occupation: INVESTMENTS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 10 / 2012

**Transaction ID : SA11.2811B**

Amount of Each Receipt this Period: -500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**RAMSAY GORHAM**

Mailing Address 142 BEACH ROAD SOUTH

City: WILMINGTON State: NC Zip Code: 28411-9222

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: 500.00

Date of Receipt: 08 / 10 / 2012

**Transaction ID : SA11.2814**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

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

2000.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 44 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LOUISE C. GRAHAM**

Mailing Address 545 ARBORETUM DR

City State Zip Code  
WILMINGTON NC 28405-4287

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2896**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LOUISE C. GRAHAM**

Mailing Address 545 ARBORETUM DR

City State Zip Code  
WILMINGTON NC 28405-4287

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : SA11.3138**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JUDI K. GRAINGER**

Mailing Address PO BOX 386

City State Zip Code  
CARY NC 27512-0386

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

Name of Employer Occupation  
CUSTOM TRAVEL SERVICES, INC / RETIRED TRAVEL SALES / RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2962**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

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

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

1200.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 45 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JUDI K. GRAINGER**

Mailing Address **PO BOX 386**

City **CARY** State **NC** Zip Code **27512-0386**

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  
**2650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3149**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CAROL GRANT**

Mailing Address **6084 NC 46 HIGHWAY**

City **GARYSBURG** State **NC** Zip Code **27831**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2012**

**Transaction ID : SA11.3106**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**A. DIAL GRAY III**

Mailing Address **402 N. FRANKLIN ST**

City **WHITEVILLE** State **NC** Zip Code **28472-3406**

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

Name of Employer **COLUMBUS COUNTY WHSE. INC.** Occupation **OWNER/OPERATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3024**

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

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

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

**600.00**

**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 46 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**A. DIAL GRAY III**

Mailing Address 402 N. FRANKLIN ST

City State Zip Code  
WHITEVILLE NC 28472-3406

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

Name of Employer Occupation  
COLUMBUS COUNTY WHSE. INC. OWNER/OPERATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11.3089**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DONALD M. GRAY**

Mailing Address 1808 MEWS DRIVE

City State Zip Code  
WILMINGTON NC 28405-4038

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

**Transaction ID : SA11.2682**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRENT D. GREENFIELD**

Mailing Address 5231 STAMPER WAY

City State Zip Code  
HOUSTON TX 77056-4217

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

Name of Employer Occupation  
HBW RESOURCES, LLC CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11.3279**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

1100.00

**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 47 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUE GRIFFIN**

Mailing Address 6205 COSTINS CT

City State Zip Code  
WILMINGTON NC 28409-2222

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

Name of Employer Occupation  
GRIFFIN ESTEP DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2892**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SUE GRIFFIN**

Mailing Address 6205 COSTINS CT

City State Zip Code  
WILMINGTON NC 28409-2222

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

Name of Employer Occupation  
GRIFFIN ESTEP DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3140**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BERNADETTE GUBITOSI**

Mailing Address 131 TRANTHAM TRAIL

City State Zip Code  
CLAYTON NC 27527-6585

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

Name of Employer Occupation  
MULBERRY ON MAIN OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**442.17**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : SA11.3126**

Amount of Each Receipt this Period  
**442.17**  
 CONTRIBUTION

IN-KIND FOOD/BEVERAGE

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

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

**1192.17**

**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 48 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WALLACE HALES**

Mailing Address **9 BEACH ROAD SOUTH**

City **WILMINGTON** State **NC** Zip Code **28411-9218**

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  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3145**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JERRY L. HALL**

Mailing Address **122 E FRINK STREET**

City **WHITEVILLE** State **NC** Zip Code **28472-2702**

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  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3025**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BETTY HARDMAN**

Mailing Address **1501 SUTTON DRIVE**

City **KINSTON** State **NC** Zip Code **28501-2611**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11.3162**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1750.00**



**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 49 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANA A. HARRIS**

Mailing Address 5312 BRADLEY BOULEVARD

City State Zip Code  
BETHESDA MD 20814-1212

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

Name of Employer Occupation  
BELLWETHER FUND DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2012

**Transaction ID : SA11.2778**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**B. KEITH HEARD**

Mailing Address 1822 STINSON CREEK ROAD

City State Zip Code  
COLUMBUS MS 39705-9352

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

Name of Employer Occupation  
TCH GROUP, LLC ASSOCIATE

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  
09 / 26 / 2012

**Transaction ID : SA11.3234**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DOROTHY COBLE HELMS**

Mailing Address 501 EAST WHITAKER MILL ROAD  
APT 203C

City State Zip Code  
RALEIGH NC 27608-2653

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2925**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**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:<br>(check only one)   | PAGE 50 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>DAVID D. HERRING</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 09 / 2012 |
| Mailing Address 504 KEITH HILL ROAD   |   | <b>Transaction ID : SA11.2841</b>                            |
| City<br>LILLINGTON  | State<br>NC                                   | Zip Code<br>27546-9771                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>2500.00 |  |
| Name of Employer<br>HOG SLAT, INC.  | Occupation<br>OWNER                           | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5000.00             | SEE REATTRIBUTION  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>DAVID D. HERRING</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 24 / 2012 |
| Mailing Address 504 KEITH HILL ROAD   |  | <b>Transaction ID : SA11.2841B</b>                           |
| City<br>LILLINGTON  | State<br>NC                                    | Zip Code<br>27546-9771                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>-1000.00 |  |
| Name of Employer<br>HOG SLAT, INC.  | Occupation<br>OWNER                            | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5000.00              | <b>[MEMO ITEM]</b><br>REATTRIBUTION TO SPOUSE                |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>LISA C. HERRING</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 24 / 2012 |
| Mailing Address 504 KEITH HILL ROAD   |   | <b>Transaction ID : SA11.2921</b>                            |
| City<br>LILLINGTON  | State<br>NC                                   | Zip Code<br>27546-9771                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>1000.00 |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER                       | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3500.00             | <b>[MEMO ITEM]</b><br>REATTRIBUTION FROM SPOUSE              |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 51 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARK HERRING**

Mailing Address 793 DOGEYE ROAD

City Benson State NC Zip Code 27504-7410

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

Name of Employer HOGSLAT Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11.2845**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBIN R. HERRING**

Mailing Address 360 LAKE SHORE DRIVE

City White Lake State NC Zip Code 28337-6194

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11.3050**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMY P. HILL**

Mailing Address 4445 RESEARCH FARM ROAD

City Hookerton State NC Zip Code 28538-9634

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

Name of Employer TULL HILL FARMS, INC Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3367**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3750.00

**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 52 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES W. HILL III**

Mailing Address PO BOX 1389

City ELIZABETHTOWN State NC Zip Code 28337-1389

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

Name of Employer Occupation  
J W HILL, III PA ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : SA11.2941**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KENDALL HILL**

Mailing Address 2574 HUGO ROAD

City GRIFTON State NC Zip Code 28530-8323

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

Name of Employer Occupation  
TULL HILL FARMS FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11.2993**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHARLOTTE E. HOBBS**

Mailing Address 9413 GREEFIELD DRIVE

City RALEIGH State NC Zip Code 27615-2306

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

Name of Employer Occupation  
NC GENERAL ASSEMBLY LEGISLATIVE ASSISTANT

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  
 07 / 11 / 2012

**Transaction ID : SA11.2688**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**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 53 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT P. HOLDING III**

Mailing Address 2324 OCEAN POINT DRIVE

City State Zip Code  
WILMINGTON NC 28405-5283

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2899**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID E. HOLT III**

Mailing Address 3418 GEORGETOWN STREET

City State Zip Code  
HOUSTON TX 77005-2910

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DAVID HOLT & ASSOCIATES ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3373**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE A. HOWARD**

Mailing Address 2713 LOCHMORE DRIVE

City State Zip Code  
RALEIGH NC 27608-1423

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RESTORATION SYSTEM VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2719**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 54 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE A. HOWARD**

Mailing Address 2713 LOCHMORE DRIVE

City RALEIGH State NC Zip Code 27608-1423

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

Name of Employer RESTORATION SYSTEM Occupation VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11.3174**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

REFUNDED \$500.00 ON 09/25/2012

**B.** Full Name (Last, First, Middle Initial)  
**J. C. HOWARD JR.**

Mailing Address 1373 DAVIS MILL RD.

City DEEP RUN State NC Zip Code 28525-9505

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

Name of Employer J.C. HOWARD FARMS, LLC Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11.3082**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WANDA H. HOWARD**

Mailing Address 4664 MARK N. SMITH ROAD

City DEEP RUN State NC Zip Code 28525-9565

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

Name of Employer DOWN EAST FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11.3079**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 55 OF 261  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH ASHLY HOY**

Mailing Address **2 EIGHTH STREET  
NE #4**

City **WASHINGTON** State **DC** Zip Code **20002-6060**

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

Name of Employer **MONUMENT POLICY GROUP** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2012**

**Transaction ID : SA11.2780**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAVERNE P. HUBERT III**

Mailing Address **870 E. FM 772**

City **RIVIERA** State **TX** Zip Code **78379-3593**

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

Name of Employer **CORNERSTONE GOVERNMENT AFFAIRS** Occupation **COUNSEL**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.3300**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALIX L. HUCKABEE**

Mailing Address **1903 N LUMINA AVENUE**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480-5012**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2900**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1500.00**

**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 56 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>PHILLIP HUDSON</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 19 / 2012 |
| Mailing Address 553 ROSIN HILL ROAD   |  | <b>Transaction ID : SA11.3251</b>                            |
| City<br>NEWTON GROVE  | State<br>NC  | Zip Code<br>28366-6810                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>CONTRIBUTION<br>200.00 |  |
| Name of Employer<br>ROSIN HILL FARMS  | Occupation<br>FARMER   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1600.00                            |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>BRENDA P. HUGHES</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 15 / 2012 |
| Mailing Address 8B MARINA STREET  |   | <b>Transaction ID : SA11.2858</b>                            |
| City<br>WRIGHTSVILLE BEACH  | State<br>NC   | Zip Code<br>28480-1762                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>CONTRIBUTION<br>1000.00 |  |
| Name of Employer<br>WET BIRD PRODUCTIONS  | Occupation<br>PRESIDENT                                       |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00                             |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>PHILIP HUMBAUGH</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 01 / 2012 |
| Mailing Address PO BOX 15151  |  | <b>Transaction ID : SA11.2759</b>                            |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28408-5151                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>CONTRIBUTION<br>100.00 |  |
| Name of Employer<br>RETIRED   | Occupation<br>RETIRED  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>650.00                             |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1300.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 57 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP HUMBAUGH**

Mailing Address **PO BOX 15151**

City **WILMINGTON** State **NC** Zip Code **28408-5151**

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 **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : SA11.2988**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP HUMBAUGH**

Mailing Address **PO BOX 15151**

City **WILMINGTON** State **NC** Zip Code **28408-5151**

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 **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2012**

**Transaction ID : SA11.3198**

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

**C.** Full Name (Last, First, Middle Initial)  
**DUANE L. ISCHER**

Mailing Address **4429 HARBOURGATE DRIVE**

City **RALEIGH** State **NC** Zip Code **27612-2719**

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 **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2915**

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

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

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

**400.00**

**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 58 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DUANE L. ISCHER**

Mailing Address 4429 HARBOURGATE DRIVE

City RALEIGH State NC Zip Code 27612-2719

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  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11.3302**

Amount of Each Receipt this Period  
 75.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**W. BRENT JACKSON**

Mailing Address 2924 ERNEST WILLIAMS ROAD

City AUTRYVILLE State NC Zip Code 28318-7966

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3369**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DEBORAH P. JACKSON**

Mailing Address 2924 ERNEST WILLIAMS ROAD

City AUTRYVILLE State NC Zip Code 28318-7966

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3371**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

2575.00

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

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

FOR LINE NUMBER: PAGE 59 OF 261  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W. BRENT JACKSON**

Mailing Address 2924 ERNEST WILLIAMS ROAD

City State Zip Code  
AUTRYVILLE NC 28318-7966

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : SA11.3369B**

Amount of Each Receipt this Period  
 -2500.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM A. JACOBSON**

Mailing Address 115 GOVERNOR BRADFORD DRIVE

City State Zip Code  
BARRINGTON RI 02806-4872

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

Name of Employer Occupation  
CORNELL UNIVERSITY PROFESSOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 27 2012

**Transaction ID : SA11.2933**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JIMMY R. JACUMIN**

Mailing Address 3690 MILLER BRIDGE ROAD

City State Zip Code  
CONNELLYS SPRINGS NC 28612-7347

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

Name of Employer Occupation  
NC SENATE STATE SENATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2012

**Transaction ID : SA11.2973**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**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 60 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT A. JEFFREYS**

Mailing Address 2026 HIGHWAY 70 WEST

City State Zip Code  
GOLDSBORO NC 27530-9542

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RA JEFFREYS DISTRIBUTION CO. BEVERAGE DISTRIBUTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2917**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT A. JEFFREYS**

Mailing Address 2026 HIGHWAY 70 WEST

City State Zip Code  
GOLDSBORO NC 27530-9542

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RA JEFFREYS DISTRIBUTION CO. BEVERAGE DISTRIBUTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3280**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LINDA JENSEN**

Mailing Address 1104 SOUTH LAKESIDE DRIVE

City State Zip Code  
FOUR OAKS NC 27524-9270

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
IBM RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2624**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 61 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILSON O. JEWELL**

Mailing Address 5012 CROWN POINT LANE

City State Zip Code  
WILMINGTON NC 28409-3298

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

Name of Employer Occupation  
JEWELL DENTISTRY DENTIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2894**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID JOHNSON**

Mailing Address PO BOX 809

City State Zip Code  
SMITHFIELD NC 27577-0809

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

Name of Employer Occupation  
INTERSTATE GLASS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 23 / 2012**

**Transaction ID : SA11.2755**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**EDNA H. JOHNSON**

Mailing Address 105 SASSARIXA TRAIL

City State Zip Code  
FOUR OAKS NC 27524-8975

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

Name of Employer Occupation  
RETIRED RETIRED

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  
**08 / 07 / 2012**

**Transaction ID : SA11.2803**

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

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

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

**600.00**

**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 62 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDNA H. JOHNSON**

Mailing Address 105 SASSARIXA TRAIL

City FOUR OAKS State NC Zip Code 27524-8975

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  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11.3361**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JERRY B. JOHNSON**

Mailing Address 1119 CANAL DRIVE

City CAROLINA BEACH State NC Zip Code 28428-6040

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  
2105.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11.2994**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JERRY B. JOHNSON**

Mailing Address 1119 CANAL DRIVE

City CAROLINA BEACH State NC Zip Code 28428-6040

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  
2105.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : SA11.3137**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

600.00

**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 63 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KATHERINE PARSLEY JOHNSON**

Mailing Address **343 THORSBY ROAD**

City **ANNAPOLIS** State **MD** Zip Code **21405-2013**

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

Name of Employer **INVESTMENT COMPANY INSTITUTE** Occupation **GOVERNMENT AFFAIRS ASSISTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.3099**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TRACY L. JOHNSON**

Mailing Address **208 TREY DRIVE**

City **BENSON** State **NC** Zip Code **27504-6538**

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

Name of Employer **ACE SERVICES, INC.** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2012**

**Transaction ID : SA11.2684**

Amount of Each Receipt this Period  
**750.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VIRGINIA H. JOHNSON**

Mailing Address **1018 EAST CAPITOL STREET, NE #4**

City **WASHINGTON** State **DC** Zip Code **20003-3932**

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

Name of Employer **US HOUSE OF REPRESENTATIVES** Occupation **CHIEF OF STAFF**

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  
**07 / 25 / 2012**

**Transaction ID : SA11.2748**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

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

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

**1300.00**

**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 64 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VIRGINIA H. JOHNSON**

Mailing Address 1018 EAST CAPITOL STREET, NE  
#4

City WASHINGTON State DC Zip Code 20003-3932

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

Name of Employer US HOUSE OF REPRESENTATIVES Occupation CHIEF OF STAFF

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  
 09 / 28 / 2012

**Transaction ID : SA11.3256**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM CHRIS JOHNSON**

Mailing Address 516 SOUTH 4TH ST.

City SMITHFIELD State NC Zip Code 27577-4454

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

Name of Employer DOWNTON SMITHFIELD DEVELOPMENT CO Occupation EXECUTIVE DIRECTOR

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  
 09 / 18 / 2012

**Transaction ID : SA11.3113**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOY ANITA JONES**

Mailing Address PO BOX 505

City SMITHFIELD State NC Zip Code 27577-0505

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

Name of Employer JOY A JONES, PA Occupation LAWYER

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  
 08 / 09 / 2012

**Transaction ID : SA11.2838**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

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

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

600.00



**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 65 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>RANDY G. JONES</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 21 / 2012 |
| Mailing Address 3501 LAKEVIEW TRAIL   |                                  | <b>Transaction ID : SA11.3169</b>                            |
| City<br>KINSTON   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>LIVESTOCK VETERINARY SERVICES   | Occupation<br>VETERINARIAN       | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>350.00 |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>S. ALISON JONES</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 26 / 2012 |
| Mailing Address 311 WEST MYRTLE STREET  |  | <b>Transaction ID : SA11.3239</b>                            |
| City<br>ALEXANDRIA  | State<br>VA                                  |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>FORD MOTOR COMPANY  | Occupation<br>DIRECTOR OF GOVERNMENT AFFAIRS | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00             |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>CAROLYN H. JUSTICE</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 14 / 2012 |
| Mailing Address PO BOX 296  |                                  | <b>Transaction ID : SA11.3094</b>                            |
| City<br>HAMPSTEAD   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>NC GENERAL ASSEMBLY   | Occupation<br>REPRESENTATIVE     | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

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

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 66 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CAMPBELL KAUFMAN**

Mailing Address 2109 WOODMONT ROAD

City State Zip Code  
ALEXANDRIA VA 22307-1156

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CORNERSTONE GOVERNMENT AFFAIRS EXECUTIVE VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3374**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES R. KAYS**

Mailing Address 208 GATEFIELD DRIVE

City State Zip Code  
WILMINGTON NC 28412-0981

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WILMINGTON PLASTIC SURGERY PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3132**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CAROL ANNE KELLY**

Mailing Address 3901 HIGHWOOD CT. NW

City State Zip Code  
WASHINGTON DC 20007-2132

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NATIONAL ASSN OF CHAIN DRUG STORES GOVERNMENT AFFAIRS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2774**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 67 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN F. KENNEY**

Mailing Address **PO BOX 99568**

City **RALEIGH** State **NC** Zip Code **27624-9568**

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

Name of Employer **KENNEY PROPERTIES, INC.** Occupation **OWNER/CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2012**

**Transaction ID : SA11.2923**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALAN KESSEL**

Mailing Address **401 SUNDIAL COURT**

City **WILMINGTON** State **NC** Zip Code **28405-8385**

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

Name of Employer **GEMORI** Occupation **SALES**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 22 / 2012**

**Transaction ID : SA11.3120**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH W. KOLETAR**

Mailing Address **1796 CANDLE RIDGE LANE, SE**

City **BOLIVIA** State **NC** Zip Code **28422-8972**

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 **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 25 / 2012**

**Transaction ID : SA11.2929**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

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

**1300.00**

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 68 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL KORNEGAY III**

Mailing Address 427 WORLEY ROAD

City State Zip Code  
PRINCETON NC 27569-8339

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : SA11.3378**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PAULA S. KORNEGAY**

Mailing Address 610 WORLEY ROAD

City State Zip Code  
PRINCETON NC 27569-8342

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : SA11.3379**

Amount of Each Receipt this Period  
 3000.00

CONTRIBUTION

SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL F. KORNEGAY**

Mailing Address 610 WORLEY RD.

City State Zip Code  
PRINCETON NC 27569-8342

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : SA11.3380**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

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

5000.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 69 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAULA S. KORNEGAY**

Mailing Address **610 WORLEY ROAD**

City **PRINCETON** State **NC** Zip Code **27569-8342**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11.3379B**

Amount of Each Receipt this Period  
**-500.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**THERESA KOSTRZEWA**

Mailing Address **2349 CHURCHILL ROAD**

City **RALEIGH** State **NC** Zip Code **27608-2003**

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

Name of Employer **CAPITOL ADVANTAGE ASSOCIATES, INC.** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3015**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN H. KOUBA JR.**

Mailing Address **217 GREY FOX LN**

City **FAYETTEVILLE** State **NC** Zip Code **28303-5099**

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

Name of Employer **CAPE FEAR ORTHOPEDICS** Occupation **DOCTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : SA11.3312**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**3000.00**

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 70 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ALAN DEAN LAMBETH**

Mailing Address 118 SETTLERS LANE

City State Zip Code  
KURE BEACH NC 28449-3943

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

Name of Employer Occupation  
LAMBETH POOLS, INC. SWIMMING POOL CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2012**

**Transaction ID : SA11.2666**

Amount of Each Receipt this Period  
**-500.00**

CONTRIBUTION

CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
**ALAN DEAN LAMBETH**

Mailing Address 118 SETTLERS LANE

City State Zip Code  
KURE BEACH NC 28449-3943

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

Name of Employer Occupation  
LAMBETH POOLS, INC. SWIMMING POOL CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 26 / 2012**

**Transaction ID : SA11.2816**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARL E. LAMM**

Mailing Address 1667 NC HIGHWAY 96 SOUTH

City State Zip Code  
FOUR OAKS NC 27524-8261

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

Name of Employer Occupation  
WTSB RADIO OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3223**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**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 71 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARJORIE B. LAMM**

Mailing Address 1667 NC HIGHWAY 96 SOUTH

City FOUR OAKS State NC Zip Code 27524-8261

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

Name of Employer WMPM Occupation OFFICE MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11.3224**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROSS LAMPE**

Mailing Address 711 CRESCENT DRIVE

City SMITHFIELD State NC Zip Code 27577-3841

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

Name of Employer LAMPE & MALPHRUS Occupation LUMBER SALES

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11.2876**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROSS LAMPE**

Mailing Address 711 CRESCENT DRIVE

City SMITHFIELD State NC Zip Code 27577-3841

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

Name of Employer LAMPE & MALPHRUS Occupation LUMBER SALES

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11.3196**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1350.00

**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 72 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES H. LANGDON JR.**

Mailing Address 10176 NC 50 HIGHWAY NORTH

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>ANGIER | State<br>NC | Zip Code<br>27501-8139 |
|----------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2012

**Transaction ID : SA11.2770**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES H. LANGDON JR.**

Mailing Address 10176 NC 50 HIGHWAY NORTH

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>ANGIER | State<br>NC | Zip Code<br>27501-8139 |
|----------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11.2978**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS REECE LANGLEY IV**

Mailing Address 8422 CROWLEY PLACE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ALEXANDRIA | State<br>VA | Zip Code<br>22308-1820 |
|--------------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer<br>USA RICE FEDERATION | Occupation<br>DIRECTOR OF GOVERNMENT AFFAIRS |
|---|--|

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2012

**Transaction ID : SA11.2777**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 73 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DONNY LASSITER**

Mailing Address 1535 LASKER ROAD

City CONWAY State NC Zip Code 27820-9753

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11.2746**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN F. LATER**

Mailing Address 252 FIRLEIGH ROAD

City SOUTHERN PINES State NC Zip Code 28387

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

Name of Employer ROBBINS, MAY, AND RICH LLP 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  
 09 / 28 / 2012

**Transaction ID : SA11.3287**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DONALD R. LATHAM**

Mailing Address 5920 MARKET ST.

City WILMINGTON State NC Zip Code 28405-3616

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

Name of Employer PARKWAY AUTOMOTIVE GROUP Occupation AUTO DEALER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2012

**Transaction ID : SA11.2999**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**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 74 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD R. LATHAM**

Mailing Address 5920 MARKET ST.

City: WILMINGTON State: NC Zip Code: 28405-3616

FEC ID number of contributing federal political committee: C

Name of Employer: PARKWAY AUTOMOTIVE GROUP Occupation: AUTO DEALER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 08 / 16 / 2012

**Transaction ID : SA11.3101**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES LEE**

Mailing Address 542 GARRETT RD

City: FOUR OAKS State: NC Zip Code: 27524-9528

FEC ID number of contributing federal political committee: C

Name of Employer: J LEE Occupation: OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 09 / 13 / 2012

**Transaction ID : SA11.3091**

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT LEEBERN JR.**

Mailing Address 401 NINETH STREET, NW  
SUITE 1000

City: WASHINGTON State: DC Zip Code: 20004

FEC ID number of contributing federal political committee: C

Name of Employer: TROUTMAN SANDERS STRATEGIES Occupation: PRINCIPAL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 30 / 2012

**Transaction ID : SA11.2771**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

600.00

**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 75 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW H. LEGGETT**

Mailing Address 1662 32ND STREET, NW

City State Zip Code  
WASHINGTON DC 20007-2960

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

Name of Employer Occupation  
US SENATE POLICY COUNSEL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2012

**Transaction ID : SA11.2754**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CALVIN E. LEWIS JR.**

Mailing Address 1121 ESSEX DR.

City State Zip Code  
WILMINGTON NC 28403-2520

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

Name of Employer Occupation  
LEWIS FARMS FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11.2866**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 7 SHERWOOD COURT

City State Zip Code  
SMITHFIELD NC 27577-4835

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11.3303**

Amount of Each Receipt this Period  
50.00  
CONTRIBUTION

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

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

1300.00

**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 76 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**L. DUANE LONG**

Mailing Address 628 PENDLETON LAKE ROAD

City State Zip Code  
RALEIGH NC 27614-9093

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

Name of Employer Occupation  
LONGISTICS CHAIRMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 12 / 2012

**Transaction ID : SA11.2738**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**L. DUANE LONG**

Mailing Address 628 PENDLETON LAKE ROAD

City State Zip Code  
RALEIGH NC 27614-9093

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

Name of Employer Occupation  
LONGISTICS CHAIRMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2949**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAMES S. MAHAN III**

Mailing Address 1931 S LIVE OAK PARKWAY

City State Zip Code  
WILMINGTON NC 28403-5321

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

Name of Employer Occupation  
LIVE OAK BANK CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2012

**Transaction ID : SA11.3158**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

3500.00

**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 77 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL MALONE**

Mailing Address 910 PAVERSTONE DRIVE

City RALEIGH State NC Zip Code 27615-4701

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

Name of Employer G4S Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2920**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RUTH LAWHON MARLER**

Mailing Address 1101 GOR-AN FARM ROAD

City SELMA State NC Zip Code 27576-6609

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

Name of Employer JOHNSTON HEALTH Occupation COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2012

**Transaction ID : SA11.3152**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JANICE W. MAUST**

Mailing Address 2008 AUTUMN COURT

City CLAYTON State NC Zip Code 27520-9252

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2909**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 78 OF 261  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ANN MAXWELL**

Mailing Address **616 LAKESHORE DRIVE**

City **GOLDSBORO** State **NC** Zip Code **27534-8970**

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

Name of Employer **MAXWELL INTERIORS** Occupation **OWNER**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : SA11.2806**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WALTER C. MCDUFFIE**

Mailing Address **PO BOX 1630**

City **ELIZABETHTOWN** State **NC** Zip Code **28337-1630**

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

Name of Employer **MCDUFFIE PEST CONTROL, INC.** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : SA11.3042**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN C. MCGRANAHAN**

Mailing Address **1422 HALCYON LANE**

City **WILMINGTON** State **NC** Zip Code **28411-9262**

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  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2012**

**Transaction ID : SA11.2967**

Amount of Each Receipt this Period  
**150.00**  
 CONTRIBUTION

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

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

**1400.00**

**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 79 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>KYLE H. MCINTYRE</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 21 / 2012 |
| Mailing Address 1938 S LIKE OAK PARKWAY   |                                   | <b>Transaction ID : SA11.3161</b>                            |
| City<br>WILMINGTON  | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00                |
| Name of Employer<br>KHM HOLDINGS, LLC   | Occupation<br>OWNER               | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>LEE MCLAMB</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 03 / 2012 |
| Mailing Address 111 MARIAH DRIVE  |                                   | <b>Transaction ID : SA11.2788</b>                            |
| City<br>FOUR OAKS   | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2500.00                |
| Name of Employer<br>RETIRED   | Occupation<br>RETIRED             | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3950.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>MRS. TIMMY MCLAMB</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 09 / 2012 |
| Mailing Address 7552 NC 96 S  |                                  | <b>Transaction ID : SA11.2699</b>                            |
| City<br>BENSON  | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>100.00                 |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>FARMER             | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>350.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3600.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 80 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARTY MCLENDON**

Mailing Address **PO BOX 10**

City **LEARY** State **GA** Zip Code **39862-0010**

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

Name of Employer **MCLENDON ACRES** Occupation **FARMER & ENTREPRENEUR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 29 / 2012**

**Transaction ID : SA11.2976**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RUBE MCMULLAN**

Mailing Address **870 OLD CANTON ROAD**

City **MARIETTA** State **GA** Zip Code **30068-2363**

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

Name of Employer **MCMULLAN & COMPANY** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 24 / 2012**

**Transaction ID : SA11.3184**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LADONNA MEINDEROS**

Mailing Address **14001 MCCAULEY BOULEVARD**

City **OKLAHOMA CITY** State **OK** Zip Code **73134-7004**

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

Name of Employer **SELF EMPLOYED** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3233**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1750.00**



**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 81 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHERRY B. MELTON**

Mailing Address 224 GOLDFIELD DR.

City State Zip Code  
GARNER NC 27529-8192

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
KEN MELTON & ASSOCIATES SENIOR CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2956**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANNE M. MELVIN**

Mailing Address PO BOX 506

City State Zip Code  
ELIZABETHTOWN NC 28337-0506

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.2943**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LARRY D. MEYERS**

Mailing Address 412 FIRST STREET, SE, STE. 1

City State Zip Code  
WASHINGTON DC 20003-1804

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MEYERS & ASSOCIATES PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3240**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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 82 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RALPH EDDIE MILLER**

Mailing Address 3912 BENTLEY BROOK DRIVE

City State Zip Code  
RALEIGH NC 27612-8076

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

Name of Employer Occupation  
NC ELECTRIC COPPERATIVES EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11.2959**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RYAN MILLER**

Mailing Address 1305 WEST 42ND STREET

City State Zip Code  
BALTIMORE MD 21211-1508

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

Name of Employer Occupation  
UBS FINANCIAL SERVICES CLIENT SERVICE ASSOCIATE

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  
08 / 23 / 2012

**Transaction ID : SA11.2889**

Amount of Each Receipt this Period  
300.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HARMON W. MISHOE**

Mailing Address 825 FOX RIDGE LANE

City State Zip Code  
WILMINGTON NC 28405-5259

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

Name of Employer Occupation  
INTROCOASTAL REALTY REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : SA11.3194**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

800.00

**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 83 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. COURTNEY MITCHELL III</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 21 / 2012 |  |
| Mailing Address 2500 N HERITAGE ROAD  |                                  | <b>Transaction ID : SA11.3165</b>                            |  |
| City<br>KINSTON   | State<br>NC                      | Zip Code<br>28501-1508                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00<br>CONTRIBUTION |  |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>DENTIST            |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |  |

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANUJ MITTAL</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 28 / 2012 |  |
| Mailing Address 3005 LONDON BELL DRIVE  |                                     | <b>Transaction ID : SA11.2955</b>                            |  |
| City<br>RALEIGH   | State<br>NC                         | Zip Code<br>27614-7597                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>250.00<br>CONTRIBUTION |  |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>REAL ESTATE DEVELOPER |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00    |  |  |

|   |                                     |   |  |
|---|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. H. NEIL MOORE</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2012  |  |
| Mailing Address 172 EDDIE L. JONES RD.  |                                     | <b>Transaction ID : SA11.3041</b>                             |  |
| City<br>IVANHOE   | State<br>NC                         | Zip Code<br>28447-9120  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>1000.00<br>CONTRIBUTION |  |
| Name of Employer<br>IVANHOE BLUEBERRY FARMS   | Occupation<br>SECRETARY / TREASURER |   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3000.00   |   |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00     |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Box] |

**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 84 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LORRAINE O. MOORE**

Mailing Address 3550 IVANHOE ROAD

City: IVANHOE State: NC Zip Code: 28447-9721

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: 300.00

Date of Receipt: 09 / 07 / 2012

**Transaction ID : SA11.3044**

Amount of Each Receipt this Period: 300.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NANCY L. MOORE**

Mailing Address 3394 IVANHOE RD.

City: IVANHOE State: NC Zip Code: 28447

FEC ID number of contributing federal political committee: C

Name of Employer: IVANHOE BLUEBERRY FARMS, INC. Occupation: OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 07 / 2012

**Transaction ID : SA11.3036**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WILLIE R. MOORE**

Mailing Address 3394 IVANHOE RD.

City: IVANHOE State: NC Zip Code: 28447

FEC ID number of contributing federal political committee: C

Name of Employer: IVANHOE BLUEBERRY FARMS Occupation: FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 27 / 2012

**Transaction ID : SA11.3228**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

1300.00

**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 85 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN MULLEN**

Mailing Address 401 EAST 86TH ST., APT 16A

City State Zip Code  
NEW YORK NY 10028-6423

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

Name of Employer Occupation  
RETIRED RETIRED

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  
 08 27 2012

**Transaction ID : SA11.2936**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN MULLEN**

Mailing Address 401 EAST 86TH ST., APT 16A

City State Zip Code  
NEW YORK NY 10028-6423

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

Name of Employer Occupation  
RETIRED RETIRED

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  
 09 29 2012

**Transaction ID : SA11.3257**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WENDY FLOYD MURPHY**

Mailing Address 140 RIVER BIRCH LANE

City State Zip Code  
WALLACE NC 28466-2554

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 12 2012

**Transaction ID : SA11.3077**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1350.00

**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 86 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MORT NEBLETT**

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code  
WILMINGTON NC 28409

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

Name of Employer Occupation  
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2012

**Transaction ID : SA11.2805**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MORT NEBLETT**

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code  
WILMINGTON NC 28409

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

Name of Employer Occupation  
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : SA11.3141**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MORT NEBLETT**

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code  
WILMINGTON NC 28409

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

Name of Employer Occupation  
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11.3215**

Amount of Each Receipt this Period  
 1500.00

CONTRIBUTION

SEE REATTRIBUTION

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

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

2750.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 87 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JUDY NEBLETT**

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code  
WILMINGTON NC 28409

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11.3245**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**MORT NEBLETT**

Mailing Address 6023 JOSHUA'S LANDING LANE

City State Zip Code  
WILMINGTON NC 28409

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

Name of Employer Occupation  
OWENCROFT FINANCIAL PARTNERS, LLC MANAGING MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11.3215B**

Amount of Each Receipt this Period  
-250.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**GRAHAM R. NEVILLE**

Mailing Address PO DRAWER 410

City State Zip Code  
SMITHFIELD NC 27577-0410

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

Name of Employer Occupation  
GRAHAM NEVILLE & ASSOCIATES CERTIFIED INSURANCE COUNSELOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 09 / 2012

**Transaction ID : SA11.2836**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

250.00

**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 88 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DARRYL D. NIRENBERG**

Mailing Address 307 WOODLAND TERRACE

City State Zip Code  
ALEXANDRIA VA 22302-3314

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

Name of Employer Occupation  
PATTON BOGGS LLP ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 01 / 2012

**Transaction ID : SA11.2757**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRYAN EDWARD PARKER**

Mailing Address PO BOX 747

City State Zip Code  
BENSON NC 27504-0747

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

Name of Employer Occupation  
PARKER GENERAL CONTRACTORS, LLC CONSTRUCTION MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 09 / 2012

**Transaction ID : SA11.2839**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID E. PARKER**

Mailing Address 3599 EASY STREET

City State Zip Code  
DUNN NC 28334-8097

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

Name of Employer Occupation  
PARKER GAS CO, INC. OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2012

**Transaction ID : SA11.2802**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

1100.00



**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 89 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES T. PARKER**

Mailing Address **PO BOX 549**

City **BENSON** State **NC** Zip Code **27504-0549**

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

Name of Employer **DR JAMES T PARKER, DDS, PA** Occupation **DENTIST**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2012**

**Transaction ID : SA11.2840**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES E. PARRISH**

Mailing Address **650 SANDERS ROAD**

City **BENSON** State **NC** Zip Code **27504-6912**

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

Name of Employer **PARRISH MANOR** Occupation **REAL ESTATE MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2012**

**Transaction ID : SA11.2837**

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

**C.** Full Name (Last, First, Middle Initial)  
**JACKIE J. PARRISH**

Mailing Address **PO BOX 86**

City **FOUR OAKS** State **NC** Zip Code **27524-0086**

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  
**310.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 10 / 2012**

**Transaction ID : SA11.2694**

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

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

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

**1150.00**

**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 90 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JACKIE J. PARRISH**

Mailing Address **PO BOX 86**

City **FOUR OAKS** State **NC** Zip Code **27524-0086**

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  
**310.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2012**

**Transaction ID : SA11.2830**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JACKIE J. PARRISH**

Mailing Address **PO BOX 86**

City **FOUR OAKS** State **NC** Zip Code **27524-0086**

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  
**310.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3011**

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

**C.** Full Name (Last, First, Middle Initial)  
**R. DOYLE PARRISH**

Mailing Address **2609 KINGSLEY ROAD**

City **RALEIGH** State **NC** Zip Code **27612-2921**

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

Name of Employer **SUMMITT HOSPITALITY** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11.3159**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

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

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

**2075.00**

**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 91 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BARRY W. PARTLO**

Mailing Address 435 HIGHWAY 42 EAST

City State Zip Code  
CLAYTON NC 27527

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

Name of Employer Occupation  
DIRECT DISTRIBUTORS INC. OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2012

**Transaction ID : SA11.2689**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BARRY W. PARTLO**

Mailing Address 435 HIGHWAY 42 EAST

City State Zip Code  
CLAYTON NC 27527

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

Name of Employer Occupation  
DIRECT DISTRIBUTORS INC. OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : SA11.3231**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN R. PATTERSON**

Mailing Address 905 CIRCLE TERRACE

City State Zip Code  
ALEXANDRIA VA 22302-3207

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

Name of Employer Occupation  
JP MORGAN CHASE GOVERNMENT RELATIONS

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  
09 / 21 / 2012

**Transaction ID : SA11.3172**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

1500.00

**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 92 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOY W. PAUL**

Mailing Address 625 MEANDER WAY

City Benson State NC Zip Code 27504-9198

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

Name of Employer SELF EMPLOYED Occupation ACCOUNTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **685.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2012

**Transaction ID : SA11.2822**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GERALD F. PEEDIN**

Mailing Address 346 WOODSIDE ROAD

City Selma State NC Zip Code 27576-8393

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 **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2012

**Transaction ID : SA11.2702**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GERALD F. PEEDIN**

Mailing Address 346 WOODSIDE ROAD

City Selma State NC Zip Code 27576-8393

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 **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2012

**Transaction ID : SA11.2703**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**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 93 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GERALD F. PEEDIN**

Mailing Address **346 WOODSIDE ROAD**

City **SELMA** State **NC** Zip Code **27576-8393**

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 **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2916**

Amount of Each Receipt this Period  
**35.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GERALD F. PEEDIN**

Mailing Address **346 WOODSIDE ROAD**

City **SELMA** State **NC** Zip Code **27576-8393**

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 **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : SA11.3285**

Amount of Each Receipt this Period  
**40.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JEFF PETERSON**

Mailing Address **17764 INVERNESS DRIVE**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2168**

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

Name of Employer **CARDINAL GLASS IND** Occupation **ACCOUNTANT**

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  
**09 / 21 / 2012**

**Transaction ID : SA11.3171**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**575.00**

**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 94 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CAROL S. PETREA**

Mailing Address **27 FAIRMONT STREET**

City **OCEAN ISLE BEACH** State **NC** Zip Code **28469-7638**

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 **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 18 / 2012**

**Transaction ID : SA11.2713**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN R. PHILLIPS**

Mailing Address **6205 PARKHILL DRIVE**

City **ALEXANDRIA** State **VA** Zip Code **22312-1161**

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

Name of Employer **DLA PIPER US. LLP** Occupation **PARTNER**

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  
**07 / 30 / 2012**

**Transaction ID : SA11.2779**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**C EDWARD PLEASANTS**

Mailing Address **10 OYSTER CATCHER ROAD**

City **WILMINGTON** State **NC** Zip Code **28411-9236**

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 **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 10 / 2012**

**Transaction ID : SA11.2849**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**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 95 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LONNIE C. POOLE**

Mailing Address 401 RAMBLEWOOD DRIVE

City State Zip Code  
RALEIGH NC 27609-6407

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

Name of Employer Occupation  
WASTE INDUSTRIES CEO

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  
 09 / 27 / 2012

**Transaction ID : SA11.3201**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARK N. POOVEY**

Mailing Address PO DRAWER 84

City State Zip Code  
WINSTON SALEM NC 27102-0084

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

Name of Employer Occupation  
WOMBLE, CARLYLE, SANDRIDGE & RICE, PL ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2901**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARK N. POOVEY**

Mailing Address PO DRAWER 84

City State Zip Code  
WINSTON SALEM NC 27102-0084

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

Name of Employer Occupation  
WOMBLE, CARLYLE, SANDRIDGE & RICE, PL ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11.3265**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

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

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

3000.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 96 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHARON POOVEY**

Mailing Address **PO DRAWER 84**

City **WINSTON SALEM** State **NC** Zip Code **27102-0084**

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

Name of Employer **WOMBLE, CARLYLE, SANDRIDGE & RICE** 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  
**09 / 30 / 2012**

**Transaction ID : SA11.3330**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES ARTHUR POPE**

Mailing Address **3324 GRANVILLE DRIVE**

City **RALEIGH** State **NC** Zip Code **27609-6924**

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

Name of Employer **VARIETY WHOLESALERS** Occupation **RETAILER/CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.3306**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOYCE W. POPE**

Mailing Address **2520 GLENWOOD AVENUE**

City **RALEIGH** State **NC** Zip Code **27608-1002**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1374.03**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 12 / 2012**

**Transaction ID : SA11.2851**

Amount of Each Receipt this Period  
**1374.03**

CONTRIBUTION

IN-KIND FOOD/BEVERAGE

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

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

**4374.03**



**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 97 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WALTER LEE POWELL**

Mailing Address **PO BOX 280**

City **KENLY** State **NC** Zip Code **27542-0280**

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

Name of Employer **BOB'S BIG BOY** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2012**

**Transaction ID : SA11.3075**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID M. POWERS**

Mailing Address **130 COPPERFIELD PLACE COURT**

City **WINSTON SALEM** State **NC** Zip Code **27106-3592**

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

Name of Employer **RAI SERVICES COMPANY** Occupation **V-P, STATE GOVERNMENT RELATIONS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11.3017**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID M. POWERS**

Mailing Address **130 COPPERFIELD PLACE COURT**

City **WINSTON SALEM** State **NC** Zip Code **27106-3592**

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

Name of Employer **RAI SERVICES COMPANY** Occupation **V-P, STATE GOVERNMENT RELATIONS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3203**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**2000.00**

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KELLEY STEWART PRECYTHE**

Mailing Address PO BOX 130

City FAISON State NC Zip Code 28341-0130

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

Name of Employer SOUTHERN PRODUCE Occupation OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11.3116**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOY PRESTAGE**

Mailing Address 4581 UNION SCHOOL ROAD

City CLINTON State NC Zip Code 28328-9012

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

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  
 07 / 23 / 2012

**Transaction ID : SA11.2749**

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

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT J. PRESTAGE**

Mailing Address 4581 UNION SCHOOL ROAD

City CLINTON State NC Zip Code 28328-9012

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

Name of Employer PRESTAGE FARMS Occupation AGRI-BUS.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2012

**Transaction ID : SA11.2742**

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

CONTRIBUTION

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

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

\_\_\_\_\_ 2000.00

\_\_\_\_\_

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 99 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN P. PREYER**

Mailing Address 214 GLENBURNIE STREET

City State Zip Code  
CHAPEL HILL NC 27514-3704

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RESTORATION SYSTEMS COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3111**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EVA S. PRIDGEN**

Mailing Address PO BOX 1553

City State Zip Code  
WILSON NC 27894-1553

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PRIDGEN FARMS, INC FARMING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3183**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JULIAN WHITE RAWL**

Mailing Address PO BOX 8068

City State Zip Code  
GREENVILLE NC 27835-8068

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PRESTON DEVELOPMENT REAL ESTATE INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3205**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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:<br>(check only one)   | PAGE 100 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |   |
|---|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. R. MAX RAYNOR JR.</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>08 / 09 / 2012 |   |
| Mailing Address PO BOX 280  |   | <b>Transaction ID : SA11.2842</b>                          |   |
| City<br>BENSON  | State<br>NC                             | Zip Code<br>27504-0280                                     | Amount of Each Receipt this Period<br>_____ 1000.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.<br>C   |   |  |   |
| Name of Employer<br>PROFESSIONAL EYE CARE   | Occupation<br>OPTOMETRIST               |  |   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 4500.00 |  |   |

|   |   |  |   |
|---|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ROBERT L. REDDING JR.</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 30 / 2012 |   |
| Mailing Address 405 RUCKER PLACE  |   | <b>Transaction ID : SA11.2773</b>                          |   |
| City<br>ALEXANDRIA  | State<br>VA                             | Zip Code<br>22301-2523                                     | Amount of Each Receipt this Period<br>_____ 1000.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.<br>C   |   |  |   |
| Name of Employer<br>THE REDDING FIRM  | Occupation<br>PRESIDENT                 |  |   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 2000.00 |  |   |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SCOTT RELAN</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>08 / 17 / 2012 |  |
| Mailing Address 2201 BEL ARBOR PLACE  |  | <b>Transaction ID : SA11.2872</b>                          |  |
| City<br>WILMINGTON  | State<br>NC                            | Zip Code<br>28403-3756                                     | Amount of Each Receipt this Period<br>_____ 250.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>WEB CONSULTANT           |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 250.00 |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | _____ 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____         |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 101 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JULIE B. RICCIO**

Mailing Address 4810 25TH ST. N

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| ARLINGTON | VA    | 22207-2619 |

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

|                  |                    |
|------------------|--------------------|
| Name of Employer | Occupation         |
| PIA              | GOVERNMENT AFFAIRS |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11.3170**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ARTHUR G. RICE**

Mailing Address 301 TALL SHIPS LANE

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| HAMPSTEAD | NC    | 28443-7715 |

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

|                     |            |
|---------------------|------------|
| Name of Employer    | Occupation |
| ALL-SPEC INDUSTRIES | CEO        |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2012

**Transaction ID : SA11.2801**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD ALLEN RIPPY JR.**

Mailing Address 114 CYPRESS AVENUE

|                    |       |            |
|--------------------|-------|------------|
| City               | State | Zip Code   |
| WRIGHTSVILLE BEACH | NC    | 28480-1917 |

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

|                  |                        |
|------------------|------------------------|
| Name of Employer | Occupation             |
| RIPPY AUTOMOTIVE | AUTO SALES AND SERVICE |

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2904**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**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 102 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT S. RIPPY**

Mailing Address 136 EDGEWATER LANE

City State Zip Code  
WILMINGTON NC 28403-3748

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

Name of Employer Occupation  
JUNGLE RAPIDS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 03 / 2012

**Transaction ID : SA11.2793**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**IRVIN AL ROSEMAN**

Mailing Address 24 BACKFIN POINT

City State Zip Code  
WILMINGTON NC 28411-9203

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

Name of Employer Occupation  
IRVING A ROSEMAN, DDS ENDODONTIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

**Transaction ID : SA11.3019**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**IRVIN AL ROSEMAN**

Mailing Address 24 BACKFIN POINT

City State Zip Code  
WILMINGTON NC 28411-9203

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

Name of Employer Occupation  
IRVING A ROSEMAN, DDS ENDODONTIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : SA11.3136**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3000.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 103 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>SYLVIA ROUNTREE</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 17 / 2012 |
| Mailing Address 1960 HILLSBORO ROAD   |                                   | <b>Transaction ID : SA11.2736</b>                            |
| City<br>WILMINGTON  | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2500.00                |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER           | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2500.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>KELLY T. ROUSE</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 10 / 2012 |
| Mailing Address 4938 LIDDELL ROAD   |                                  | <b>Transaction ID : SA11.3465</b>                            |
| City<br>SEVEN SPRINGS   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER          | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>SUSAN S. ROUSE</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 21 / 2012 |
| Mailing Address 6219 HIGHWAY 55 WEST  |                                  | <b>Transaction ID : SA11.3166</b>                            |
| City<br>KINSTON   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>RETIRED   | Occupation<br>RETIRED            | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3250.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

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

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(check only one)  
 11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES R. ROUZER**

Mailing Address 109 ALNICK COURT

City State Zip Code  
DURHAM NC 27712-1106

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

Name of Employer Occupation  
STATE OF NC NETWORK SPECIALIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11.2865**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRANCES L. ROUZER**

Mailing Address PO BOX 2288

City State Zip Code  
BANNER ELK NC 28604-2288

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

**Transaction ID : SA11.2681**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RANDALL M. RUSSELL**

Mailing Address 940 SWINKS MILL ROAD

City State Zip Code  
MCLEAN VA 22102-2127

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

Name of Employer Occupation  
LESHER & RUSELL CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : SA11.3187**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3750.00



**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 105 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ROSALYN L. SAMPSON</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012 |  |
| Mailing Address 5218 NC 130 EAST  |  | <b>Transaction ID : SA11.3288</b>                        |  |
| City<br>ROWLAND   | State<br>NC                            | Zip Code<br>28383  | Amount of Each Receipt this Period<br>_____ 250.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.  |  | C  |  |
| Name of Employer<br>RETIRED   | Occupation<br>RETIRED                  |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 250.00 |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. EVELYN L. SANDERS</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 17 / 2012 |  |
| Mailing Address 144 PEACH ORCHARD DRIVE   |  | <b>Transaction ID : SA11.2870</b>                        |  |
| City<br>BENSON  | State<br>NC                            | Zip Code<br>27504-8304                                   | Amount of Each Receipt this Period<br>_____ 250.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.  |  | C  |  |
| Name of Employer<br>SOUTHEASTERN ADULT DAY CENTER   | Occupation<br>HEALTH ADMINISTRATOR     |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 250.00 |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MICHAEL SAULS</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>07 / 30 / 2012 |  |
| Mailing Address 3878 BLUFTON MILL ROAD  |   | <b>Transaction ID : SA11.2772</b>                        |  |
| City<br>FREE UNION  | State<br>VA                                   | Zip Code<br>22940-2013                                   | Amount of Each Receipt this Period<br>_____ 250.00<br>CONTRIBUTION |
| FEC ID number of contributing federal political committee.  |   | C  |  |
| Name of Employer<br>DUDINSKY & ASSOCIATES   | Occupation<br>GOVERNMENT & BUSINESS RELATIONS |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 1250.00       |  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | _____ 750.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____        |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 106 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MICHAEL SAULS</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 17 / 2012 |
| Mailing Address 3878 BLUFTON MILL ROAD  |   | <b>Transaction ID : SA11.3108</b>                            |
| City<br>FREE UNION  | State<br>VA                                   |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>DUDINSKY & ASSOCIATES   | Occupation<br>GOVERNMENT & BUSINESS RELATIONS | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1250.00             |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SIDNEY E. SAULS</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 27 / 2012 |
| Mailing Address 10579 NC 50 NORTH   |                                  | <b>Transaction ID : SA11.3216</b>                            |
| City<br>ANGIER  | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>NC FARM BUREAU INSURANCE  | Occupation<br>INSURANCE AGENT    | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ALICE SCOTT</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 13 / 2012 |
| Mailing Address 7757 OSCAR LOOP   |                                   | <b>Transaction ID : SA11.3092</b>                            |
| City<br>LUCAMA  | State<br>NC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>100.00                 |
| Name of Employer<br>SCOTT FARMS   | Occupation<br>FARMER              | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1350.00 |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 850.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 107 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>SONNY SCOTT</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 16 / 2012 |
| Mailing Address 7757 OSCAR LOOP   |  | <b>Transaction ID : SA11.2723</b>                            |
| City<br>LUCAMA  | State<br>NC  | Zip Code<br>27851-9361                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>500.00<br>CONTRIBUTION |  |
| Name of Employer<br>SCOTT FARMS   | Occupation<br>FARMER   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00                             |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>KIERAN SHANAHAN</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 28 / 2012 |
| Mailing Address 1704 BRASSFIELD ROAD  |   | <b>Transaction ID : SA11.3355</b>                            |
| City<br>RALEIGH   | State<br>NC   | Zip Code<br>27614-9447                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>2500.00<br>CONTRIBUTION |  |
| Name of Employer<br>SHANAHAN LAW GROUP  | Occupation<br>LAWYER  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5000.00                             |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>TINA SHANAHAN</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 23 / 2012 |
| Mailing Address 1704 BRASSFIELD ROAD  |  | <b>Transaction ID : SA11.3356</b>                            |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27614-9447                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>718.43<br>CONTRIBUTION |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER                                      |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>718.43                             | IN-KIND FOOD/BEVERAGE  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3718.43 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 108 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HARRY M. SHAW**

Mailing Address **PO BOX 1108**

City **CLINTON** State **NC** Zip Code **28329-1108**

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

Name of Employer **COASTAL CAROLINA PLUMBING** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2012**

**Transaction ID : SA11.2871**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BILLIE W. SHELTON**

Mailing Address **6817 WEST ROBERTA ROAD**

City **OCEAN ISLE BEACH** State **NC** Zip Code **28469-5761**

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  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2012**

**Transaction ID : SA11.2743**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS H. SHIPMAN**

Mailing Address **2417 BARBOUR RD.**

City **FALLS CHURCH** State **VA** Zip Code **22043-3026**

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

Name of Employer **CORNERSTONE GOVERNMENT AFFAIRS** Occupation **VICE PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.3307**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1700.00**

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 109 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TUCKER C. SHUMACK**

Mailing Address 2346 SOUTH NASH STREET

City ARLINGTON State VA Zip Code 22202-1548

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

Name of Employer GDS STRATEGIES Occupation MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2012

**Transaction ID : SA11.2776**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TUCKER C. SHUMACK**

Mailing Address 2346 SOUTH NASH STREET

City ARLINGTON State VA Zip Code 22202-1548

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

Name of Employer GDS STRATEGIES Occupation MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11.3235**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**B LEON SKINNER**

Mailing Address 108 EDGEWATER LANE

City WILMINGTON State NC Zip Code 28403-3748

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

Name of Employer SOUTHERN HOME BUILDERS Occupation BUILDER

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  
 08 / 16 / 2012

**Transaction ID : SA11.2882**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1500.00

**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 110 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN E. SKVARLA**

Mailing Address **PO BOX 2457**

City **PINEHURST** State **NC** Zip Code **28370-2457**

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

Name of Employer **RESTORATION SYSTEMS** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2012**

**Transaction ID : SA11.3110**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANNETTE SMITH**

Mailing Address **2430 N NC HIGHWAY 111**

City **PINK HILL** State **NC** Zip Code **28572-7732**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2012**

**Transaction ID : SA11.3078**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANTHONY C. SMITH**

Mailing Address **2444 N NC HIGHWAY 111**

City **PINK HILL** State **NC** Zip Code **28572-7732**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

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  
**07 / 25 / 2012**

**Transaction ID : SA11.2745**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**1750.00**

**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 111 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BURROWS G. SMITH**

Mailing Address 131 SKYSTASAIL DRIVE

City State Zip Code  
WILMINGTON NC 28409-2029

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

Name of Employer Occupation  
SKINNER-SMITH CONSTRUCTONS REAL ESTATE DEVELOPMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : SA11.3210**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KEITH SMITH**

Mailing Address 2515 LAKEWOOD ROAD

City State Zip Code  
FOUR OAKS NC 27524-8332

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11.3217**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RICK D. SMITH**

Mailing Address PO BOX 636

City State Zip Code  
WILSON NC 27894-0636

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

Name of Employer Occupation  
INDEPENDENT LEAF TOBACCO COMPANY TOBACCO LEAF DEALER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

**Transaction ID : SA11.2680**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

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

3250.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 112 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>TIMOTHY DALE SMITH</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 24 / 2012 |
| Mailing Address 3106 OLD FAYETTEVILLE ROAD  |                                  | <b>Transaction ID : SA11.2942</b>                            |
| City<br>GARLAND   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>FARMER             | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>KAREN S. SNYDER</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2012 |
| Mailing Address 204 NEUSE RIDGE DRIVE   |                                  | <b>Transaction ID : SA11.3123</b>                            |
| City<br>CLAYTON   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>60.00                  |
| Name of Employer<br>LEGAL SHIELD  | Occupation<br>SALES              | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>260.00 | IN-KIND FOOD/BEVERAGE  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>HUNTER SPRUILL</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 28 / 2012 |
| Mailing Address 310 US HIGHWAY 13-17 SOUTH  |                                  | <b>Transaction ID : SA11.3289</b>                            |
| City<br>WINDSOR   | State<br>NC                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>W&S FARMS   | Occupation<br>FARMER             | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>260.00 |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 560.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |



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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 113 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KATHY H. STANCIL**

Mailing Address 466 STANCIL ROAD

City State Zip Code  
ANGIER NC 27501-8342

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

Name of Employer Occupation  
STANCIL BUILDING OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 09 / 2012

**Transaction ID : SA11.2835**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LUTHER D. STARLING**

Mailing Address 104 EAST ARROWHEAD DRIVE

City State Zip Code  
CLINTON NC 28328-3059

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

Name of Employer Occupation  
DAUGHTRY, WOODARD, LAWRENCE & STAF ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : SA11.3191**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALGIE STEPHENS**

Mailing Address 319 CHAPANOKE ROAD  
SUITE 102

City State Zip Code  
RALEIGH NC 27603-3433

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

Name of Employer Occupation  
STEPHENS CENTER, INC LAND DEVELOPER

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  
09 / 28 / 2012

**Transaction ID : SA11.3290**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

2250.00

**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 114 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DONNA STEPHENSON**

Mailing Address **PO BOX 43326**

City **ATLANTA** State **GA** Zip Code **30336-0326**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2012**

**Transaction ID : SA11.3364**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DWIGHT STOGSDILL**

Mailing Address **322 CAUSEWAY DRIVE  
STE 406**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480-1986**

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 **2450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 18 / 2012**

**Transaction ID : SA11.2707**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DWIGHT STOGSDILL**

Mailing Address **322 CAUSEWAY DRIVE  
STE 406**

City **WRIGHTSVILLE BEACH** State **NC** Zip Code **28480-1986**

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 **2450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2895**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**2700.00**

**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 115 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DWIGHT STOGSDILL**

Mailing Address 322 CAUSEWAY DRIVE  
STE 406

City State Zip Code  
WRIGHTSVILLE BEACH NC 28480-1986

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : SA11.3208**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**REGINALD STRICKLAND**

Mailing Address 1642 COUNTRY CLUB ROAD

City State Zip Code  
MOUNT OLIVE NC 28365-8586

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

Name of Employer Occupation  
STRICKLAND FARMS, INC OWNER/FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11.3260**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JANE C. SULLIVAN**

Mailing Address PO BOX 3649

City State Zip Code  
WILMINGTON NC 28406-0649

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

Name of Employer Occupation  
JH LAND, LLC MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : SA11.2879**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

4700.00

**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 116 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>SCOTT C. SULLIVAN</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 16 / 2012 |
| Mailing Address PO BOX 3649   |   | <b>Transaction ID : SA11.2880</b>                            |
| City<br>WILMINGTON  | State<br>NC   | Zip Code<br>28406-0649                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>2000.00<br>CONTRIBUTION |  |
| Name of Employer<br>JH LAND, LLC  | Occupation<br>MANAGER   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3000.00                             |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>GEORGE RONALD TAYLOR</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 01 / 2012 |
| Mailing Address 2305 2ND AVENUE   |  | <b>Transaction ID : SA11.2731</b>                            |
| City<br>ELIZABETHTOWN   | State<br>NC  | Zip Code<br>28337-9709                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>200.00<br>CONTRIBUTION |  |
| Name of Employer<br>TAYLOR MANUFACTURING  | Occupation<br>PRESIDENT                                      |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00                            |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>GEORGE RONALD TAYLOR</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2012 |
| Mailing Address 2305 2ND AVENUE   |  | <b>Transaction ID : SA11.3039</b>                            |
| City<br>ELIZABETHTOWN   | State<br>NC  | Zip Code<br>28337-9709                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>500.00<br>CONTRIBUTION |  |
| Name of Employer<br>TAYLOR MANUFACTURING  | Occupation<br>PRESIDENT                                      |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00                            |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2700.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 117 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GREG P. TAYLOR**

Mailing Address 190 LAKEVIEW DRIVE

City ELIZABETHTOWN State NC Zip Code 28337-5122

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11.3045**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMANDA B. THOMAS**

Mailing Address 320 BARNES LOOP

City ELIZABETHTOWN State NC Zip Code 28337-6368

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

Name of Employer CENTER FARMS Occupation OFFICE MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11.2983**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VIVIAN M. THOMAS**

Mailing Address 3344 NC HWY 210 E

City HARRELLS State NC Zip Code 28444-8924

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

Name of Employer THOMAS TIMBER Occupation LOGGING

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  
 09 / 07 / 2012

**Transaction ID : SA11.3035**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1000.00

**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 118 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CONSTANCE E. TIPTON**

Mailing Address 712 EAST CAPITOL STREET, NE

City State Zip Code  
WASHINGTON DC 20003-1344

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

Name of Employer Occupation  
NATIONAL DAIRY MANUFACTURERS ASSO( FEDERAL GOVERNMENT AFFAIRS

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  
09 / 21 / 2012

**Transaction ID : SA11.3370**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL K. TORREY**

Mailing Address 1514 NORTH FILLMORE STREET

City State Zip Code  
ARLINGTON VA 22201-3910

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

Name of Employer Occupation  
MICHAEL TORREY & ASSOCIATES, LLC FEDERAL GOVERNMENT AFFAIRS / PRINCI

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

**Transaction ID : SA11.3153**

Amount of Each Receipt this Period  
300.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CASON L. TRASK**

Mailing Address 2511 S CANTERBURY ROAD

City State Zip Code  
WILMINGTON NC 28403-6101

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : SA11.3147**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

1300.00

**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 119 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RAIFORD TRASK III**

Mailing Address 3001 MIDDLE SOUND LOOP ROAD

City State Zip Code  
WILMINGTON NC 28411-7841

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
AUTUMN HALL REALTY, LLC VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3018**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RAIFORD TRASK III**

Mailing Address 3001 MIDDLE SOUND LOOP ROAD

City State Zip Code  
WILMINGTON NC 28411-7841

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
AUTUMN HALL REALTY, LLC VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3212**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RYAN TRIPLETTE**

Mailing Address 1512 KINGMAN PLACE, NW

City State Zip Code  
WASHINGTON DC 20005-3709

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
FRANKLIN SQUARE GROUP CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.3070**

Amount of Each Receipt this Period

CONTRIBUTION

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

**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: PAGE 120 OF 261  
(check only one)  
 11a  11b  11c  11d  15  
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRA K. TRIVETT**

Mailing Address 1109 NEUSE RIDGE DRIVE

City State Zip Code  
CLAYTON NC 27527-5333

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

Name of Employer Occupation  
NC DHHS MANAGER

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  
07 03 2012

**Transaction ID : SA11.2625**

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SANDRA K. TRIVETT**

Mailing Address 1109 NEUSE RIDGE DRIVE

City State Zip Code  
CLAYTON NC 27527-5333

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

Name of Employer Occupation  
NC DHHS MANAGER

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  
08 01 2012

**Transaction ID : SA11.2760**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SANDRA K. TRIVETT**

Mailing Address 1109 NEUSE RIDGE DRIVE

City State Zip Code  
CLAYTON NC 27527-5333

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

Name of Employer Occupation  
NC DHHS MANAGER

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  
08 23 2012

**Transaction ID : SA11.2952**

Amount of Each Receipt this Period  
300.00  
CONTRIBUTION

SEE REATTRIBUTION

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

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

600.00



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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 121 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL K. GEOUGE**

Mailing Address 1109 NEUSE RIDGE DRIVE

City Clayton State NC Zip Code 27527-5333

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

Name of Employer SANFORD, HOLZHOUSER Occupation ATTORNEY

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  
 09 / 21 / 2012

**Transaction ID : SA11.3157**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**SANDRA K. TRIVETT**

Mailing Address 1109 NEUSE RIDGE DRIVE

City Clayton State NC Zip Code 27527-5333

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

Name of Employer NC DHHS Occupation MANAGER

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  
 09 / 21 / 2012

**Transaction ID : SA11.2952B**

Amount of Each Receipt this Period  
 -300.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**GUS H. TULLOSS**

Mailing Address 209 COBBLESTONE COURT

City ROCKY MOUNT State NC Zip Code 27804-6365

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

Name of Employer GUS H. TULLOSS INSURANCE Occupation OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2950**

Amount of Each Receipt this Period  
 150.00

CONTRIBUTION

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

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

150.00

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

|   |   |                 |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 122 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY TYSON**

Mailing Address 5207 ROSE LOOP ROAD

City State Zip Code  
NASHVILLE NC 27856-8755

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

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  
**08 09 2012**

**Transaction ID : SA11.2831**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES D. UPHAM**

Mailing Address 118 BROOKVIEW ROAD

City State Zip Code  
WILMINGTON NC 28409-9131

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

Name of Employer Occupation  
WELLS FARGO FINANCIAL ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 15 2012**

**Transaction ID : SA11.3135**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARL V. VENTERS**

Mailing Address 148 EDGEWATER LANE

City State Zip Code  
WILMINGTON NC 28403-3748

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 27 2012**

**Transaction ID : SA11.3232**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1000.00**

**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 123 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CARLOS VICKERS**

Mailing Address 436 REV. A.H. HENDLEY ROAD

City Nashville State GA Zip Code 31639

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

Name of Employer VICKERS FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012

**Transaction ID : SA11.2768**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CARLOS VICKERS**

Mailing Address 436 REV. A.H. HENDLEY ROAD

City Nashville State GA Zip Code 31639

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

Name of Employer VICKERS FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012

**Transaction ID : SA11.2769**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SARAH J. WALSH**

Mailing Address 6866 MCLEAN PROVINCE CIRCLE

City FALLS CHURCH State VA Zip Code 22043-1668

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

Name of Employer GLAXOSMITHKLINE Occupation VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : SA11.2782**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 124 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**C. DAVID WARD**

Mailing Address 6448 SHINN WOOD ROAD

City State Zip Code  
WILMINGTON NC 28409-2117

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

Name of Employer Occupation  
ALLSTATE INSURANCE AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 10 / 2012

**Transaction ID : SA11.2848**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**W. I. WARREN**

Mailing Address PO BOX 1507

City State Zip Code  
DUNN NC 28335-1507

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

Name of Employer Occupation  
WARREN OIL COMPANY OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 27 / 2012

**Transaction ID : SA11.2947**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**W. I. WARREN**

Mailing Address PO BOX 1507

City State Zip Code  
DUNN NC 28335-1507

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

Name of Employer Occupation  
WARREN OIL COMPANY OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11.3308**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**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 125 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MELISSA M. WARSHAW**

Mailing Address 2048 DEER ISLAND LN.

City: WILMINGTON State: NC Zip Code: 28405-5247

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 08 / 15 / 2012

**Transaction ID : SA11.3148**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT F. WARWICK**

Mailing Address 2000 MARSH HARBOR PLACE

City: WILMINGTON State: NC Zip Code: 28405-4258

FEC ID number of contributing federal political committee: C

Name of Employer: MCGLADREY LLP Occupation: CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 18 / 2012

**Transaction ID : SA11.2715**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT F. WARWICK**

Mailing Address 2000 MARSH HARBOR PLACE

City: WILMINGTON State: NC Zip Code: 28405-4258

FEC ID number of contributing federal political committee: C

Name of Employer: MCGLADREY LLP Occupation: CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 08 / 2012

**Transaction ID : SA11.2813**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

750.00

**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 126 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT F. WARWICK**

Mailing Address 2000 MARSH HARBOR PLACE

City State Zip Code  
WILMINGTON NC 28405-4258

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

Name of Employer Occupation  
MCGLADREY LLP CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : SA11.3195**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD B. WAX**

Mailing Address PO BOX 60

City State Zip Code  
AMORY MS 38821-0060

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

Name of Employer Occupation  
THE WAX COMPANY INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11.3243**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FORD B. WEST**

Mailing Address 3698 TANGLEWOOD LANE

City State Zip Code  
DAVIDSONVILLE MD 21035-2445

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

Name of Employer Occupation  
THE FERTILIZER INSTITUTE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11.3309**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

2750.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 127 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EMILY B. WHALEY**

Mailing Address **PO BOX 256**

City **BEULAVILLE** State **NC** Zip Code **28518-0256**

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

Name of Employer **DUPLIN GENERAL HOSPITAL** Occupation **NURSE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 12 / 2012**

**Transaction ID : SA11.3087**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DONNA M. WHITE**

Mailing Address **1330 W MAIN STREET**

City **CLAYTON** State **NC** Zip Code **27520-1629**

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

Name of Employer **DHHS** Occupation **R.N.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 10 / 2012**

**Transaction ID : SA11.2691**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID WALTER WHITNEY**

Mailing Address **208 BEACON COVE**

City **STAFFORD** State **VA** Zip Code **22554-2506**

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

Name of Employer **US HOUSE OF REPRESENTATIVES** Occupation **COUNSEL**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11.3262**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**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 128 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TARA WILKERSON**

Mailing Address **604 WILLIWOOD ROAD**

City **FAYETTEVILLE** State **NC** Zip Code **28311-2985**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKERS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2906**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EDITH ROSE WILKINS**

Mailing Address **411-A SOUTH 3RD STREET**

City **SMITHFIELD** State **NC** Zip Code **27577-4417**

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  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2012**

**Transaction ID : SA11.2622**

Amount of Each Receipt this Period  
**75.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STEPHANIE MCLAMB WILLIAMS**

Mailing Address **42 EMILY COURT**

City **NEWTON GROVE** State **NC** Zip Code **28366-9065**

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

Name of Employer **SCOTT FARMS, INC.** Occupation **SALES / MARKETING**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 09 / 2012**

**Transaction ID : SA11.2701**

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

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

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

**2675.00**



**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 129 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W. LEE WILLIAMS**

Mailing Address 2114 S CANTERBURY RD

City: WILMINGTON State: NC Zip Code: 28403-6104

FEC ID number of contributing federal political committee: C

Name of Employer: W L W FAMILY HOLDINGS, LLC Occupation: OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 28 / 2012

**Transaction ID : SA11.2965**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**W. LEE WILLIAMS**

Mailing Address 2114 S CANTERBURY RD

City: WILMINGTON State: NC Zip Code: 28403-6104

FEC ID number of contributing federal political committee: C

Name of Employer: W L W FAMILY HOLDINGS, LLC Occupation: OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 15 / 2012

**Transaction ID : SA11.3151**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRANDON WINFREY**

Mailing Address 228 SOUTH WASHINGTON STREET  
SUITE B-20

City: ALEXANDRIA State: VA Zip Code: 22314-5402

FEC ID number of contributing federal political committee: C

Name of Employer: WINFREY & COMPANY Occupation: PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 29 / 2012

**Transaction ID : SA11.3055**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

IN-KIND FOOD/BEVERAGE

**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 130 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LEE WISE**

Mailing Address **PO BOX 913**

City **NOBLE** State **OK** Zip Code **73068-0913**

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

Name of Employer **MSCI** Occupation **PROGRAMMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11.3264**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GENEVIEVE MEDLIN WOODALL**

Mailing Address **413 SOUTH 2ND STREET**

City **SMITHFIELD** State **NC** Zip Code **27577-4411**

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  
**385.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 10 / 2012**

**Transaction ID : SA11.2696**

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

**C.** Full Name (Last, First, Middle Initial)  
**GENEVIEVE MEDLIN WOODALL**

Mailing Address **413 SOUTH 2ND STREET**

City **SMITHFIELD** State **NC** Zip Code **27577-4411**

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  
**385.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : SA11.2926**

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

**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:<br>(check only one)   | PAGE 131 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>HAL B. WOODALL</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 16 / 2012 |  |
| Mailing Address PO BOX 275  |                                   | <b>Transaction ID : SA11.2860</b>                            |  |
| City<br>KENLY   | State<br>NC                       | Zip Code<br>27542-0275                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00<br>CONTRIBUTION |  |
| Name of Employer<br>KENLY MEDICAL ASSOC.  | Occupation<br>PHYSICIAN           |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1620.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>HAL B. WOODALL</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 24 / 2012 |  |
| Mailing Address PO BOX 275  |                                   | <b>Transaction ID : SA11.3185</b>                            |  |
| City<br>KENLY   | State<br>NC                       | Zip Code<br>27542-0275                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00<br>CONTRIBUTION |  |
| Name of Employer<br>KENLY MEDICAL ASSOC.  | Occupation<br>PHYSICIAN           |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1620.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>LAURA B. WOOTEN</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 26 / 2012 |  |
| Mailing Address 6000 CANADERO DRIVE   |                                  | <b>Transaction ID : SA11.3219</b>                            |  |
| City<br>RALEIGH   | State<br>NC                      | Zip Code<br>27612-1802                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>100.00<br>CONTRIBUTION |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER          |  |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1100.00     |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Box] |

**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 132 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WALTER CECIL WORSLEY III**

Mailing Address 123 SHIPYARD BOULEVARD

City State Zip Code  
WILMINGTON NC 28412-6225

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

Name of Employer Occupation  
WORSLEY COMPANIES, INC PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2012

**Transaction ID : SA11.2829**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RUSSELL B. WRIGHT**

Mailing Address 2050 ROYAL PALM WAY

City State Zip Code  
BOCA RATON FL 33432-7446

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

Name of Employer Occupation  
INTERSTATE PROPERTIES PARTNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11.3291**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL D. ZEHR**

Mailing Address 730 11TH STREET, NE  
APT 203

City State Zip Code  
WASHINGTON DC 20002-3752

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

Name of Employer Occupation  
SENATOR MEL MARTINEZ LEGISLATIVE DIRECTOR

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  
 09 / 21 / 2012

**Transaction ID : SA11.3368**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

5500.00

**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 133 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NORRIS FARMS**

Mailing Address **PO BOX 552**

City **GARLAND** State **NC** Zip Code **28441-0552**

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

Name of Employer Occupation

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  
**08 / 24 / 2012**

**Transaction ID : SA11.2980**

Amount of Each Receipt this Period  
**350.00**

CONTRIBUTION

SEE ATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE W. NORRIS JR.**

Mailing Address **PO BOX 552**

City **GARLAND** State **NC** Zip Code **28441-0552**

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

Name of Employer Occupation  
**NORRIS FARMS FARMER**

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  
**08 / 29 / 2012**

**Transaction ID : SA11.2981**

Amount of Each Receipt this Period  
**350.00**

CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**PORUS LLC**

Mailing Address **503 EMERYWOOD DRIVE**

City **HIGH POINT** State **NC** Zip Code **27262-2811**

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

Name of Employer Occupation

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  
**08 / 23 / 2012**

**Transaction ID : SA11.2964**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

SEE ATTRIBUTION BELOW

**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 134 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>ROBERT COTTAM</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 12 / 2012 |
| Mailing Address 503 EMERYWOOD DRIVE   |  | <b>Transaction ID : SA11.3056</b>                            |
| City<br>HIGH POINT  | State<br>NC                                  | Zip Code<br>27262-2811                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>500.00 |  |
| Name of Employer<br>PORUS, LLC  | Occupation<br>OWNER                          | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00             | <b>[MEMO ITEM]</b>   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>ROUSECO INC.</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 20 / 2012 |
| Mailing Address P.O. BOX 2495   |  | <b>Transaction ID : SA11.2888</b>                            |
| City<br>KINSTON   | State<br>NC                                  | Zip Code<br>28502-2495                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>500.00 |  |
| Name of Employer  | Occupation                                   | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>0.00               | REFUNDED \$500.00 ON 08/22/2012                              |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>W &amp; S FARMS</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 01 / 2012 |
| Mailing Address 310 US HIGHWAY 13-17 SOUTH  |  | <b>Transaction ID : SA11.2732</b>                            |
| City<br>WINDSOR   | State<br>NC                                  | Zip Code<br>27983-9120                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>200.00 |  |
| Name of Employer  | Occupation                                   | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>400.00             | SEE ATTRIBUTIONS BELOW                                       |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 700.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                 |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 135 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HUNTER SPRUILL**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer W&S FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11.2733**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 10.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**NANCY G. SPRUILL**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer W&S FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 190.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11.2735**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 90.00

CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**WAYLAND O. SPRUILL**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer W&S FARMS Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11.2734**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 136 OF 261 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W & S FARMS**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11.2986**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

SEE ATTRIBUTIONS BELOW

**B.** Full Name (Last, First, Middle Initial)  
**NANCY G. SPRUILL**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer Occupation  
W&S FARMS FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
190.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11.3057**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WAYLAND O. SPRUILL**

Mailing Address 310 US HIGHWAY 13-17 SOUTH

City WINDSOR State NC Zip Code 27983-9120

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

Name of Employer Occupation  
W&S FARMS FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2012

**Transaction ID : SA11.2987**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION

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

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

200.00

236982.35



**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 137 OF 261 |
|   | <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)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHNSTON RW**

Mailing Address **PO BOX 137**

City **SMITHFIELD** State **NC** Zip Code **27577-0137**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **52.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : SA11.3125**

Amount of Each Receipt this Period  
**52.48**

CONTRIBUTION

IN-KIND FOOD/BEVERAGE NON-FEDERAL POLITICAL COMMITTEE; FEDERALLY PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**LOWER CAPE FEAR REPUBLICAN WOMEN**

Mailing Address **PO BOX 7635**

City **WILMINGTON** State **NC** Zip Code **28406-7635**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

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  
**09 / 10 / 2012**

**Transaction ID : SA11.3033**

Amount of Each Receipt this Period  
**600.00**

CONTRIBUTION

NON-FEDERAL POLITICAL COMMITTEE; FEDERALLY PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address **PO BOX 12905**

City **RALEIGH** State **NC** Zip Code **27605-2905**

FEC ID number of contributing federal political committee. **C C00038505**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1140.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2012**

**Transaction ID : SA11.2730**

Amount of Each Receipt this Period  
**285.00**

CONTRIBUTION

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

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

**937.48**

**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 138 OF 261 |
|   | <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)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address PO BOX 12905

City RALEIGH State NC Zip Code 27605-2905

FEC ID number of contributing federal political committee. **C** C00038505

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012

**Transaction ID : SA11.2761**

Amount of Each Receipt this Period  
 285.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address PO BOX 12905

City RALEIGH State NC Zip Code 27605-2905

FEC ID number of contributing federal political committee. **C** C00038505

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11.2997**

Amount of Each Receipt this Period  
 285.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address PO BOX 12905

City RALEIGH State NC Zip Code 27605-2905

FEC ID number of contributing federal political committee. **C** C00038505

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11.3283**

Amount of Each Receipt this Period  
 285.00  
 CONTRIBUTION

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

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

855.00

1792.48

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 139 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. DANNY MCCOMAS CAMPAIGN**

Full Name (Last, First, Middle Initial)  
**DANNY MCCOMAS CAMPAIGN**

Mailing Address **PO BOX 2274**

City **WILMINGTON** State **NC** Zip Code **28402-2274**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3295**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

REFUNDED \$500.00 ON 09/28/2012

**B. GARDNER FOR CONGRESS 2012**

Full Name (Last, First, Middle Initial)  
**GARDNER FOR CONGRESS 2012**

Mailing Address **1420 WEST CANAL COURT  
SUITE 10**

City **LITTLETON** State **CO** Zip Code **80120-5660**

FEC ID number of contributing federal political committee. **C C00492454**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2012**

**Transaction ID : SA11.2775**

Amount of Each Receipt this Period  
**2000.00**

CONTRIBUTION

**C. GEORGE HOLDING FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**GEORGE HOLDING FOR CONGRESS**

Mailing Address **PO BOX 97187**

City **RALEIGH** State **NC** Zip Code **27624-7187**

FEC ID number of contributing federal political committee. **C C00499236**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : SA11.3218**

Amount of Each Receipt this Period  
**1300.00**

CONTRIBUTION

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

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

**3800.00**

**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 140 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. JOHN CARTER FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 6930  
 City ROUND ROCK State TX Zip Code 78683-6930  
 FEC ID number of contributing federal political committee. **C** C00371203  
 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  
 07 / 26 / 2012  
**Transaction ID : SA11.2820**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. MARIO DIAZ-BALART FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8770 SUNSET DRIVE #420  
 City MIAMI State FL Zip Code 33173-3512  
 FEC ID number of contributing federal political committee. **C** C00376087  
 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  
 08 / 06 / 2012  
**Transaction ID : SA11.2786**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. RE-ELECT TIM GRIFFIN FOR CONGRESS COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 7526  
 City LITTLE ROCK State AR Zip Code 72217-7526  
 FEC ID number of contributing federal political committee. **C** C00468116  
 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  
 08 / 15 / 2012  
**Transaction ID : SA11.2859**  
 Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

3500.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 141 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE RICHARD BURR COMMITTEE**

Mailing Address PO BOX 5928

City WINSTON SALEM State NC Zip Code 27113-5928

FEC ID number of contributing federal political committee. **C** C00385526

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 17 / 2012

**Transaction ID : SA11.2679**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE RICHARD BURR COMMITTEE**

Mailing Address PO BOX 5928

City WINSTON SALEM State NC Zip Code 27113-5928

FEC ID number of contributing federal political committee. **C** C00385526

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : SA11.2781**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WOMACK FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 508

City ROGERS State AR Zip Code 72757-0508

FEC ID number of contributing federal political committee. **C** C00477745

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : SA11.2671**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

5000.00

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

|   |                                    |                                     |  |                                    |
|---|------------------------------------|-------------------------------------|--|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |                                     | PAGE 142 OF 261                                |                                    |
|   | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN CONSERVATIVE UNION PAC**

Mailing Address 1007 CAMERON STREET

City State Zip Code  
ALEXANDRIA VA 22314-2426

FEC ID number of contributing federal political committee. **C** C00130658

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11.3236**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN HEALTH CARE ASSOCIATION PAC (AHCA-PAC)**

Mailing Address 1201 L STREET, NW

City State Zip Code  
WASHINGTON DC 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 12 / 2012

**Transaction ID : SA11.3085**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN NURSERY AND LANDSCAPE ASSOCIATION (ANLA) PAC**

Mailing Address 1000 VERMONT AVENUE, 3RD FLOOR

City State Zip Code  
WASHINGTON DC 20005-4914

FEC ID number of contributing federal political committee. **C** C00022988

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11.3298**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3250.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 143 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SECURITY PAC**

Mailing Address 192 LIBERTY LANE

City ANNISTON State AL Zip Code 36207-2646

FEC ID number of contributing federal political committee. **C** C00439521

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  
 08 / 02 / 2012

**Transaction ID : SA11.2756**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASPLUNDH TREE EXPERT COMPANY (ATE) PAC**

Mailing Address 703 BLAIR MILL ROAD

City WILLOW GROVE State PA Zip Code 19090

FEC ID number of contributing federal political committee. **C** C00177741

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  
 09 / 29 / 2012

**Transaction ID : SA11.3249**

Amount of Each Receipt this Period  
 4000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE RECYCLERS ASSOCIATION PAC**

Mailing Address 9113 CHURCH STREET

City MANASSAS State VA Zip Code 20110-5456

FEC ID number of contributing federal political committee. **C** C00401125

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  
 09 / 17 / 2012

**Transaction ID : SA11.3114**

Amount of Each Receipt this Period  
 350.00

CONTRIBUTION

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

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

5350.00

**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 144 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AX PAC**

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314-1837

FEC ID number of contributing federal political committee. **C C00506535**

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  
 09 / 27 / 2012

**Transaction ID : SA11.3211**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COMMUNITY BANCSHARES OF MISSISSIPPI PAC**

Mailing Address DRAWER 59

City FOREST State MS Zip Code 39074-0059

FEC ID number of contributing federal political committee. **C C00228924**

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  
 09 / 29 / 2012

**Transaction ID : SA11.3304**

Amount of Each Receipt this Period  
 1500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVES RESTORING EXCELLENCE (CRE) PAC**

Mailing Address PO BOX 98629

City RALEIGH State NC Zip Code 27624-8629

FEC ID number of contributing federal political committee. **C C00502187**

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  
 09 / 27 / 2012

**Transaction ID : SA11.3220**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3500.00



**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 145 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. FINANCIAL SERVICES ROUNDTABLE PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 500 SOUTH

City WASHINGTON State DC Zip Code 20004-2508

FEC ID number of contributing federal political committee. **C C00193177**

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  
 07 / 27 / 2012

**Transaction ID : SA11.2784**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B. FIRST CITIZENS BANK & TRUST COMPANY (FCB COMBINED) PAC FEDERAL**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 27131

City RALEIGH State NC Zip Code 27611-7131

FEC ID number of contributing federal political committee. **C C00168914**

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  
 09 / 18 / 2012

**Transaction ID : SA11.3131**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C. GOP GENERATION Y FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 9055

City PEORIA State IL Zip Code 61612-9055

FEC ID number of contributing federal political committee. **C C00448191**

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  
 07 / 26 / 2012

**Transaction ID : SA11.2819**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

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

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

8500.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 146 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>HEARTDOCPAC</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 13 / 2012 |  |
| Mailing Address PO BOX 628  |             | <b>Transaction ID : SA11.3090</b>                        |  |
| City<br>EVANSVILLE  | State<br>IN | Zip Code<br>47704-0628                                   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00523381</b>  |             | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>Occupation  |             | CONTRIBUTION   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>1000.00                        |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>INTERNATIONAL PIZZA HUT FRANCHISE HOLDERS ASSOC. (I.P.H.F.H.A.) PAC</b>                         |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 26 / 2012 |  |
| Mailing Address 7829 EAST ROCKHILL SUITE 201  |             | <b>Transaction ID : SA11.3237</b>                        |  |
| City<br>WICHITA   | State<br>KS | Zip Code<br>67206-3918                                   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00251447</b>  |             | Amount of Each Receipt this Period<br>3000.00            |  |
| Name of Employer<br>Occupation  |             | CONTRIBUTION   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>4000.00                        |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>IPAA WILDCATTERS FUND</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012 |  |
| Mailing Address 1201 15TH STREET, NW SUITE 300  |             | <b>Transaction ID : SA11.3086</b>                        |  |
| City<br>WASHINGTON  | State<br>DC | Zip Code<br>20005-2842                                   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00246306</b>  |             | Amount of Each Receipt this Period<br>2500.00            |  |
| Name of Employer<br>Occupation  |             | CONTRIBUTION   |  |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>2500.00                        |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 6500.00 |

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 147 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. LIBERTY MUTUAL INSURANCE CO. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 175 BERKELEY STREET  
 City BOSTON State MA Zip Code 02116-5066  
 FEC ID number of contributing federal political committee. **C** C00171843  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : SA11.3226**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. LOCKE LORD BISSELL & LIDDELL LLP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 TRAVIS STREET SUITE 2800  
 City HOUSTON State TX Zip Code 77002-2914  
 FEC ID number of contributing federal political committee. **C** C00117861  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012  
**Transaction ID : SA11.3282**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C. LONGHORN PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 30844  
 City BETHESDA State MD Zip Code 20824-0844  
 FEC ID number of contributing federal political committee. **C** C00402602  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012  
**Transaction ID : SA11.2670**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

3000.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 148 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (WEDGE PAC / MARSHA) PAC**

Mailing Address **PO BOX 680063**

City **FRANKLIN** State **TN** Zip Code **37068-0063**

FEC ID number of contributing federal political committee. **C C00409276**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 03 / 2012**

**Transaction ID : SA11.2795**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES (MP) PAC FEDERAL**

Mailing Address **539 SOUTH MAIN STREET  
ROOM 2635**

City **FINDLAY** State **OH** Zip Code **45840-3229**

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 04 / 2012**

**Transaction ID : SA11.3000**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MAVERICK PAC USA**

Mailing Address **200 CONCORD PLAZA  
SUITE 425**

City **SAN ANTONIO** State **TX** Zip Code **78216-6996**

FEC ID number of contributing federal political committee. **C C00427435**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 02 / 2012**

**Transaction ID : SA11.2627**

Amount of Each Receipt this Period  
**1500.00**

CONTRIBUTION

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

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

**3500.00**

**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 149 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. MAVERICK PAC USA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 CONCORD PLAZA  
 SUITE 425  
 City SAN ANTONIO State TX Zip Code 78216-6996  
 FEC ID number of contributing federal political committee. **C C00427435**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012  
**Transaction ID : SA11.3133**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B. MCDONALDS CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 MCDONALD'S DRIVE  
 City OAK BROOK State IL Zip Code 60523-5500  
 FEC ID number of contributing federal political committee. **C C00063164**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012  
**Transaction ID : SA11.2907**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3601 VINCENNES ROAD  
 City INDIANAPOLIS State IN Zip Code 46268-1154  
 FEC ID number of contributing federal political committee. **C C00170258**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012  
**Transaction ID : SA11.2844**  
 Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

7000.00

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

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page |                                     | FOR LINE NUMBER: (check only one)              | PAGE 150 OF 261  |
| <input type="checkbox"/> 11a<br>12                                      | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NC FARM BUREAU FARM PAC**

Mailing Address **PO BOX 27766**

City **RALEIGH** State **NC** Zip Code **27611-7766**

FEC ID number of contributing federal political committee. **C C00216754**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 11  | 2012    |

**Transaction ID : SA11.2693**

Amount of Each Receipt this Period  

|         |
|---------|
| 2500.00 |
|---------|

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**NC FARM BUREAU FARM PAC**

Mailing Address **PO BOX 27766**

City **RALEIGH** State **NC** Zip Code **27611-7766**

FEC ID number of contributing federal political committee. **C C00216754**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 13  | 2012    |

**Transaction ID : SA11.2853**

Amount of Each Receipt this Period  

|         |
|---------|
| 2500.00 |
|---------|

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**NEUROSURGERY PAC**

Mailing Address **5550 MEADOWBROOK COURT**

City **ROLLING MEADOWS** State **IL** Zip Code **60008**

FEC ID number of contributing federal political committee. **C C00413955**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 04  | 2012    |

**Transaction ID : SA11.3004**

Amount of Each Receipt this Period  

|         |
|---------|
| 2000.00 |
|---------|

**CONTRIBUTION**

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

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

|         |
|---------|
| 7000.00 |
|---------|

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 151 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEW PAC**

Mailing Address **PO BOX 7480**

City **VISALIA** State **CA** Zip Code **93290-7480**

FEC ID number of contributing federal political committee. **C C00398750**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 26 / 2012**

**Transaction ID : SA11.2817**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA COTTON PRODUCERS ASSOCIATION COMMITTEE (NCC) PAC**

Mailing Address **PO BOX 656**

City **NASHVILLE** State **NC** Zip Code **27856-0656**

FEC ID number of contributing federal political committee. **C C00416297**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2012**

**Transaction ID : SA11.2832**

Amount of Each Receipt this Period  
**1500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NORTH CAROLINA SOYBEAN PRODUCERS ASSOCIATION (NC SOY) PAC**

Mailing Address **211 EAST SIX FORKS ROAD  
SUITE 102**

City **RALEIGH** State **NC** Zip Code **27609-7743**

FEC ID number of contributing federal political committee. **C C00491456**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : SA11.2857**

Amount of Each Receipt this Period  
**750.00**

CONTRIBUTION

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

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

**3250.00**

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 152 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. NORTH CAROLINA PORK COUNCIL PAC (NCP PAC)**

Full Name (Last, First, Middle Initial)  
NORTH CAROLINA PORK COUNCIL PAC (NCP PAC)

Mailing Address 2300 REXWOODS DRIVE  
SUITE 340

City RALEIGH State NC Zip Code 27607-3361

FEC ID number of contributing federal political committee. **C** C00235184

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11.2992**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. OLD DOMINION FREIGHT LINE, INC PAC**

Full Name (Last, First, Middle Initial)  
OLD DOMINION FREIGHT LINE, INC PAC

Mailing Address 500 OLD DOMINION WAY

City THOMASVILLE State NC Zip Code 27360-8923

FEC ID number of contributing federal political committee. **C** C00496836

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11.3305**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C. PIEDMONT NATURAL GAS PAC**

Full Name (Last, First, Middle Initial)  
PIEDMONT NATURAL GAS PAC

Mailing Address PO BOX 33068

City CHARLOTTE State NC Zip Code 28233-3068

FEC ID number of contributing federal political committee. **C** C00144824

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : SA11.2720**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00



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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 153 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PIEDMONT NATURAL GAS PAC**

Mailing Address **PO BOX 33068**

City **CHARLOTTE** State **NC** Zip Code **28233-3068**

FEC ID number of contributing federal political committee. **C C00144824**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.2720B**

Amount of Each Receipt this Period  
**-359.56**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**PIEDMONT NATURAL GAS PAC**

Mailing Address **PO BOX 33068**

City **CHARLOTTE** State **NC** Zip Code **28233-3068**

FEC ID number of contributing federal political committee. **C C00144824**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.3432**

Amount of Each Receipt this Period  
**359.56**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**PRINTING INUDSTRIES OF AMERICA (PRINT) PAC**

Mailing Address **601 13TH ST. NW, STE. 3508**

City **WASHINGTON** State **DC** Zip Code **20005-3807**

FEC ID number of contributing federal political committee. **C C00018028**

Name of Employer Occupation

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  
**09 / 28 / 2012**

**Transaction ID : SA11.3286**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**500.00**

**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 154 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM) PAC**

Mailing Address **610 S. BOULEVARD**

City **TAMPA** State **FL** Zip Code **33606-2693**

FEC ID number of contributing federal political committee. **C C00451294**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2012**

**Transaction ID : SA11.3238**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SUPPORT TO ENSURE VICTORY EVERYWHERE (STEVE) PAC**

Mailing Address **228 SOUTH WASHINGTON STREET  
SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00501478**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : SA11.3248**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TOMORROW IS MEANINGFUL (TIM) PAC**

Mailing Address **209 PENNSYLVANIA AVENUE  
SUITE 2109**

City **WASHINGTON** State **DC** Zip Code **20003-1107**

FEC ID number of contributing federal political committee. **C C00495887**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11.3375**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**7000.00**

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 155 OF 261 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS, INC (TRU**

Mailing Address 430 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C C00002881**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : SA11.2739**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VANDEVENTER BLACK LLP PAC**

Mailing Address 500 WORLD TRADE CENTER

City NORFOLK State VA Zip Code 23510-1779

FEC ID number of contributing federal political committee. **C C00418145**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2948**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VIRGINIA-CAROLINA'S PEANUT ASSOCIATION, INC PAC**

Mailing Address PO BOX 8

City NASHVILLE State NC Zip Code 27856-0008

FEC ID number of contributing federal political committee. **C C00185652**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11.2834**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

2250.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 156 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM PAC**

Mailing Address 2700 CUMBERLAND PARKWAY  
SUITE 150

City ATLANTA State GA Zip Code 30339-3321

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11.3372**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WARD AND SMITH, PA PAC**

Mailing Address P.O. BOX 867

City NEW BERN State NC Zip Code 28563-0867

FEC ID number of contributing federal political committee. **C** C00491506

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11.2897**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**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).....

6000.00

81900.00

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

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 157 OF 261 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input checked="" type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |                                    |  |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>DAVID ROUZER</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 30 / 2012 |
| Mailing Address 108 PEACH ORCHARD DRIVE   |                                    | <b>Transaction ID : 001</b>                                  |
| City<br>BENSON  | State<br>NC                        |  |
| FEC ID number of contributing federal political committee.<br>C H2NC07096   |                                    | Amount of Each Receipt this Period<br>5496.72                |
| Name of Employer<br>THE ROUZER COMPANY  | Occupation<br>BUSINESS CONSULTANT  | CONTRIBUTION   |
| Receipt For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>21128.91 | IN-KIND MILEAGE  |

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

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

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5496.72 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5496.72 |

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

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

FOR LINE NUMBER: PAGE 158 OF 261  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TAKE BACK NORTH CAROLINA**

Mailing Address **2470 DANIELLS BRIDGE ROAD**  
**SUITE 121**

City **ATHENS** State **GA** Zip Code **30606-6191**

FEC ID number of contributing federal political committee. **C C00513929**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**11845.76**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 13 / 2012**

**Transaction ID : SA12.3059**

Amount of Each Receipt this Period  
**11845.76**

**TRANSFER OF NET JOINT FUNDRAISING PROCEEDS**

**SEE ATTRIBUTION BELOW**

**B.** Full Name (Last, First, Middle Initial)  
**HOUSE CONSERVATIVES FUND**

Mailing Address **228 SOUTH WASHINGTON STREET**  
**SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00326439**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 06 / 2012**

**Transaction ID : SA12.3061**

Amount of Each Receipt this Period  
**2500.00**

**CONTRIBUTION**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

Mailing Address **PO BOX 30844**

City **BETHESDA** State **MD** Zip Code **20824-0844**

FEC ID number of contributing federal political committee. **C C00420695**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 03 / 2012**

**Transaction ID : SA12.3063**

Amount of Each Receipt this Period  
**5000.00**

**CONTRIBUTION**

**[MEMO ITEM]**

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

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

**11845.76**

**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 159 OF 261 |
|   | <input type="checkbox"/> 11a<br><input checked="" type="checkbox"/> 12<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 13a<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 13b<br><input type="checkbox"/> 11d<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH PAC (PETE PAC)**

Mailing Address 7804 EVENING LANE

City State Zip Code  
ALEXANDRIA VA 22306-2754

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 03 / 2012

**Transaction ID : SA12.3062**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM**

Mailing Address 2700 CUMBERLAND PARKWAY  
SUITE 150

City State Zip Code  
ATLANTA GA 30339-3321

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2012

**Transaction ID : SA12.3060**

Amount of Each Receipt this Period  
375.00

CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**YOUNG GUNS 2012 ROUND 2**

Mailing Address 228 SOUTH WASHINGTON STREET  
SUITE 115

City State Zip Code  
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00523555

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5287.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

**Transaction ID : SA12.3064**

Amount of Each Receipt this Period  
5287.65

TRANSFER OF NET JOINT FUNDRAISING PROCEEDS

SEE ATTRIBUTION BELOW

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

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

5287.65

**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 160 OF 261 |
|   | <input type="checkbox"/> 11a<br><input checked="" type="checkbox"/> 12<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 13a<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 13b<br><input type="checkbox"/> 11d<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOM PAC**

Mailing Address **PO BOX 2485**

City **SPRINGFIELD** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00482703**

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  
**07 / 20 / 2012**

**Transaction ID : SA12.3068**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **600.00** \_\_\_\_\_

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF GLENN THOMPSON**

Mailing Address **PO BOX 1302**

City **LEWISTOWN** State **PA** Zip Code **17044-3302**

FEC ID number of contributing federal political committee. **C C00444620**

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  
**07 / 20 / 2012**

**Transaction ID : SA12.3066**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00** \_\_\_\_\_

CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address **320 FIRST STREET, SE**

City **WASHINGTON** State **DC** Zip Code **20003-1838**

FEC ID number of contributing federal political committee. **C C00075820**

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  
**06 / 30 / 2012**

**Transaction ID : SA12.3065**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5000.00** \_\_\_\_\_

CONTRIBUTION

**[MEMO ITEM]**

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

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

\_\_\_\_\_ **0.00** \_\_\_\_\_

\_\_\_\_\_



**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 161 OF 261 |
|   | <input type="checkbox"/> 11a<br><input checked="" type="checkbox"/> 12<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 13a<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 13b<br><input type="checkbox"/> 11d<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**OLSON FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 16381

City State Zip Code  
SUGAR LAND TX 77496-6381

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

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  
 07 / 20 / 2012

**Transaction ID : SA12.3067**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**[MEMO ITEM]**

**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).....

0.00

17133.41

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 162 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DAVID ROUZER</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                     |
| Mailing Address 108 PEACH ORCHARD DR  |  |                          | Amount of Each Disbursement this Period<br>5496.72<br><b>Transaction ID : 002</b> |
| City<br>BENSON  | State<br>NC  | Zip Code<br>27504-8304   |   |
| Purpose of Disbursement<br>IN-KIND MILEAGE  |  | Category/<br>Type<br>002 |   |
| Candidate Name  |  |                          |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: 00   |  |                          |   |

|   |  |                          |   |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TODD BATCHELOR</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 24 / 2012                           |
| Mailing Address 4804 ROYAL TROON DRIVE  |  |                          | Amount of Each Disbursement this Period<br>1983.03<br><b>Transaction ID : SB17.I554</b> |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27604        |   |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/<br>Type<br>003 |   |
| Candidate Name  |  |                          |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: 00   |  |                          |   |

|   |  |                          |  |
|---|--|--------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TODD BATCHELOR</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2012                          |
| Mailing Address 4804 ROYAL TROON DRIVE  |  |                          | Amount of Each Disbursement this Period<br>541.04<br><b>Transaction ID : SB17.I636</b> |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27604        |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/<br>Type<br>003 |  |
| Candidate Name  |  |                          |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |
| State: District: 00   |  |                          |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 8020.79 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 163 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TODD BATCHELOR</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 21 / 2012 |  |
| Mailing Address 4804 ROYAL TROON DRIVE  |  |                          | Amount of Each Disbursement this Period<br>698.00             |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27604        | Transaction ID : SB17.I755                                    |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1276.50            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I449                                    |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1511.32            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I477                                    |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3485.82 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 164 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1139.14            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I514                                    |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1366.91            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I533                                    |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1503.33            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I573                                    |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4009.38 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 165 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 16 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1714.73       |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I601                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>09 / 07 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1679.82       |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I700                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. THOMAS N. BUGBEE JR.</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2012 |  |
| Mailing Address 708 SQUIRE LANE   |  |                          | Amount of Each Disbursement this Period<br>1637.20       |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28411        | Transaction ID : SB17.I723                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING/TRAVEL   |  | Category/<br>Type<br>001 |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5031.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 166 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BERNADETTE GUBITOSI</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012 |  |
| Mailing Address 131 TRANTHAM TRAIL  |  |                        | Amount of Each Disbursement this Period<br>442.17             |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27527-6585 | Transaction ID : <b>SB17.3126</b>                             |  |
| Purpose of Disbursement<br>IN-KIND CONTRIBUTION   |  | Category/<br>Type      | IN-KIND FOOD/BEVERAGE   |  |
| Candidate Name  |  |                        |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |  |
| State: District: 00   |  |                        |   |  |

|   |  |                   |   |  |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BOB HARRIS</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 3806 LASSITER MILL ROAD   |  |                   | Amount of Each Disbursement this Period<br>2000.00            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27609 | Transaction ID : <b>SB17.I462</b>                             |  |
| Purpose of Disbursement<br>RESEARCH CONSULTING  |  | Category/<br>Type | 001   |  |
| Candidate Name  |  |                   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |  |
| State: District: 00   |  |                   |   |  |

|   |  |                   |   |  |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BOB HARRIS</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012 |  |
| Mailing Address 3806 LASSITER MILL ROAD   |  |                   | Amount of Each Disbursement this Period<br>2000.00            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27609 | Transaction ID : <b>SB17.I535</b>                             |  |
| Purpose of Disbursement<br>RESEARCH CONSULTING  |  | Category/<br>Type | 001   |  |
| Candidate Name  |  |                   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |  |
| State: District: 00   |  |                   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4442.17 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 167 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BOB HARRIS</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 16 / 2012                                |
| Mailing Address 3806 LASSITER MILL ROAD  |   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.I603</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27609  | Purpose of Disbursement<br>RESEARCH CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LAURA KILIAN</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2012                               |
| Mailing Address 2840 OXFORD ROAD   |   | Amount of Each Disbursement this Period<br>255.53<br><b>Transaction ID : SB17.I571</b> |
| City<br>HENDERSON  | State<br>NC   |  |
| Zip Code<br>27536  | Purpose of Disbursement<br>MILEAGE  | Category/<br>Type<br>002   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PATTY MALLORY</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2012                               |
| Mailing Address 3409 MILLBROOK DRIVE   |   | Amount of Each Disbursement this Period<br>224.76<br><b>Transaction ID : SB17.I572</b> |
| City<br>WILSON   | State<br>NC   |  |
| Zip Code<br>27893  | Purpose of Disbursement<br>MILEAGE  | Category/<br>Type<br>002   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2480.29 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 168 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TOWNES MAXWELL</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 05 / 2012                                |
| Mailing Address 1011 SOUTHPOINT CROSSING DRIVE   |   | Amount of Each Disbursement this Period<br>3020.00<br><b>Transaction ID : SB17.I475</b> |
| City<br>DURHAM   | State<br>NC   |   |
| Zip Code<br>27713  | Purpose of Disbursement<br>CAMPAIGN CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TOWNES MAXWELL</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2012                                |
| Mailing Address 1011 SOUTHPOINT CROSSING DRIVE   |   | Amount of Each Disbursement this Period<br>3520.00<br><b>Transaction ID : SB17.I570</b> |
| City<br>DURHAM   | State<br>NC   |   |
| Zip Code<br>27713  | Purpose of Disbursement<br>CAMPAIGN CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TOWNES MAXWELL</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 07 / 2012                                |
| Mailing Address 1011 SOUTHPOINT CROSSING DRIVE   |   | Amount of Each Disbursement this Period<br>3520.00<br><b>Transaction ID : SB17.I702</b> |
| City<br>DURHAM   | State<br>NC   |   |
| Zip Code<br>27713  | Purpose of Disbursement<br>CAMPAIGN CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 10060.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 169 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TOWNES MAXWELL</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2012                           |
| Mailing Address 1011 SOUTHPPOINT CROSSING DRIVE   |  |                          | Amount of Each Disbursement this Period<br>3520.00<br><b>Transaction ID : SB17.I745</b> |
| City<br>DURHAM  | State<br>NC  | Zip Code<br>27713        |   |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING  |  | Category/<br>Type<br>001 |   |
| Candidate Name  |  |                          |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: 00   |  |                          |   |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JOYCE W. POPE</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 12 / 2012                           |
| Mailing Address 2520 GLENWOOD AVENUE  |  |                        | Amount of Each Disbursement this Period<br>1374.03<br><b>Transaction ID : SB17.2851</b> |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27608-1002 |   |
| Purpose of Disbursement<br>IN-KIND CONTRIBUTION   |  | Category/<br>Type      |   |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        | IN-KIND FOOD/BEVERAGE   |
| State: District: 00   |  |                        |   |

|   |  |                          |   |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DODIE RENFER</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address 721 RAYMOND DRIVE   |  |                          | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.I517</b> |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27527        |   |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING  |  | Category/<br>Type<br>001 |   |
| Candidate Name  |  |                          |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: 00   |  |                          |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6894.03 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 170 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DODIE RENFER</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 05 / 2012 |  |
| Mailing Address 721 RAYMOND DRIVE   |  |                          | Amount of Each Disbursement this Period<br>1400.00       |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27527        | Transaction ID : SB17.I518                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING  |  | 001<br>Category/<br>Type |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DODIE RENFER</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 26 / 2012 |  |
| Mailing Address 721 RAYMOND DRIVE   |  |                          | Amount of Each Disbursement this Period<br>5125.96       |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27527        | Transaction ID : SB17.I555                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING  |  | 001<br>Category/<br>Type |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DODIE RENFER</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012 |  |
| Mailing Address 721 RAYMOND DRIVE   |  |                          | Amount of Each Disbursement this Period<br>5000.00       |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27527        | Transaction ID : SB17.I670                               |  |
| Purpose of Disbursement<br>CAMPAIGN CONSULTING  |  | 001<br>Category/<br>Type |  |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |
| State: District: 00   |  |                          |  |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 11525.96 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 171 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DODIE RENFER</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012                                |
| Mailing Address 721 RAYMOND DRIVE  |   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.I671</b> |
| City<br>CLAYTON  | State<br>NC   |   |
| Zip Code<br>27527  | Purpose of Disbursement<br>CAMPAIGN CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DODIE RENFER</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2012                               |
| Mailing Address 721 RAYMOND DRIVE  |   | Amount of Each Disbursement this Period<br>125.98<br><b>Transaction ID : SB17.I724</b> |
| City<br>CLAYTON  | State<br>NC   |  |
| Zip Code<br>27527  | Purpose of Disbursement<br>FOOD/BEVERAGE  | Category/<br>Type<br>007   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DENISE RENTZ</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 10 / 2012                               |
| Mailing Address 141 LEACH DRIVE  |   | Amount of Each Disbursement this Period<br>311.36<br><b>Transaction ID : SB17.I706</b> |
| City<br>GARNER   | State<br>NC   |  |
| Zip Code<br>27529  | Purpose of Disbursement<br>TRAVEL   | Category/<br>Type<br>002   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2437.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 172 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TINA SHANAHAN</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2012 |
| Mailing Address 1704 BRASSFIELD ROAD  |  | Amount of Each Disbursement this Period<br>718.43        |
| City<br>RALEIGH   | State<br>NC  |  |
| Zip Code<br>27614-9447  | Purpose of Disbursement<br>IN-KIND CONTRIBUTION  | <b>Transaction ID : SB17.3356</b>                        |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | IN-KIND FOOD/BEVERAGE                                    |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KAREN S. SNYDER</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 07 / 2012 |
| Mailing Address 204 NEUSE RIDGE DRIVE   |  | Amount of Each Disbursement this Period<br>60.00         |
| City<br>CLAYTON   | State<br>NC  |  |
| Zip Code<br>27527-6605  | Purpose of Disbursement<br>IN-KIND CONTRIBUTION  | <b>Transaction ID : SB17.3123</b>                        |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | IN-KIND FOOD/BEVERAGE                                    |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BRANDON WINFREY</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012 |
| Mailing Address 228 SOUTH WASHINGTON STREET<br>SUITE B-20   |  | Amount of Each Disbursement this Period<br>250.00        |
| City<br>ALEXANDRIA  | State<br>VA  |  |
| Zip Code<br>22314-5402  | Purpose of Disbursement<br>IN-KIND CONTRIBUTION  | <b>Transaction ID : SB17.3055</b>                        |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2012<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | IN-KIND FOOD/BEVERAGE                                    |
| State: District: 00   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1028.43 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 173 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

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

Mailing Address 2300 CLAREDON BOULEVARD  
SUITE 1004

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PHONE BANKS Category/Type 004

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement 07 / 05 / 2012

Amount of Each Disbursement this Period 2335.11

Transaction ID : SB17.I430

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

Mailing Address 2300 CLAREDON BOULEVARD  
SUITE 1004

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PHONE BANKS Category/Type 004

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement 08 / 29 / 2012

Amount of Each Disbursement this Period 100.00

Transaction ID : SB17.I667

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

Mailing Address 2300 CLAREDON BOULEVARD  
SUITE 1004

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PHONE BANKS Category/Type 004

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement 09 / 07 / 2012

Amount of Each Disbursement this Period 100.00

Transaction ID : SB17.I699

**SUBTOTAL** of Disbursements This Page (optional)..... 2535.11

**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:<br>(check only one)  | PAGE 174 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. AIRTRAN AIRWAYS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1800 PHOENIX BOULEVARD  
SUITE 104

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 08 / 20 / 2012

Amount of Each Disbursement this Period: 269.20

Transaction ID : SB17.I630

Category/Type: 002

**B. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 85431

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement CREDIT CARD FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 07 / 01 / 2012

Amount of Each Disbursement this Period: 1.27

Transaction ID : SB17.I526

Category/Type: 003

**C. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 85431

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement CREDIT CARD FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 07 / 19 / 2012

Amount of Each Disbursement this Period: 8.40

Transaction ID : SB17.I527

Category/Type: 003

**SUBTOTAL** of Disbursements This Page (optional) ..... 278.87

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

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 175 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 13 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I528</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 12 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>0.69<br><b>Transaction ID : SB17.I529</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 11 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I530</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3.23 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 176 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>8.40               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I531</b>                             |
| Candidate Name  | Category/<br>Type<br>003   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 26 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>12.00              |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I549</b>                             |
| Candidate Name  | Category/<br>Type<br>003   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>10.05              |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I578</b>                             |
| Candidate Name  | Category/<br>Type<br>003   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 30.45 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 177 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 29 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>..... 10.05        |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I579</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 29 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>..... 19.80        |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I580</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 31 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>..... 2.25         |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I581</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | ..... 32.10 |
| <b>TOTAL</b> This Period (last page this line number only)..... | .....       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 178 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I582</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>2.25               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I583</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>19.80              |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I585</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 26.25 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 179 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I586</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I587</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I588</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7.72 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 180 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 04 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I593</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 16 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I598</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 13 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I599</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 14.55 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 181 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 12 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I600</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 16 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>0.69<br><b>Transaction ID : SB17.I609</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 17 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>39.30<br><b>Transaction ID : SB17.I626</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 41.26 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 182 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 24 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>39.30         |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I642</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20          |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I643</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20          |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I644</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 47.70 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 183 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>12.00<br><b>Transaction ID : SB17.I645</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 21 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I646</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 17 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I647</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18.45 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 184 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 17 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I648</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 17 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I649</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 17 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I650</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 15.52 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 185 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 16 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>10.05         |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I651</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 25 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20          |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I653</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 27 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>19.80         |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I654</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 34.05 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 186 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 27 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I655</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 27 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I656</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 27 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I657</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 16.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 187 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 27 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.47<br><b>Transaction ID : SB17.I658</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>97.80<br><b>Transaction ID : SB17.I661</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>97.80<br><b>Transaction ID : SB17.I662</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 197.07 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 188 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I663</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 28 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>19.80<br><b>Transaction ID : SB17.I664</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 28 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I665</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 34.05 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 189 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 28 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I666</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 30 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I675</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 30 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I676</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18.45 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 190 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012                        |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I677</b> |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012                        |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I678</b> |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012                         |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I683</b> |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 14.55 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 191 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 03 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>1.27               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I684</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 04 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I686</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 04 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I687</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 9.67 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 192 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 03 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I688</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I691</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I692</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7.72 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 193 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 06 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>39.30              |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I693</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 06 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>0.69               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I694</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 05 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>1.27               |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I695</b>                             |
| Candidate Name  | 003<br>Category/<br>Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 41.26 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 194 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>19.80<br><b>Transaction ID : SB17.I707</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I708</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I709</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 34.05 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 195 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>4.20          |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I726</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>10.05         |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I734</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2012 |
| Mailing Address PO BOX 85431  |  | Amount of Each Disbursement this Period<br>19.80         |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70810   | Purpose of Disbursement<br>CREDIT CARD FEE   | <b>Transaction ID : SB17.I735</b>                        |
| Candidate Name  | 003<br>Category/<br>Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 34.05 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 196 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 18 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I736</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 18 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I737</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I738</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 21.37 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 197 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I739</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 20 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I758</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 21 / 2012                              |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I759</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 21.37 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 198 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 85431

City: BATON ROUGE State: LA Zip Code: 70810

Purpose of Disbursement: CREDIT CARD FEE Category/Type: 003

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: 00

Date of Disbursement: 09 / 21 / 2012

Amount of Each Disbursement this Period: 19.80  
Transaction ID : SB17.I760

**B. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 85431

City: BATON ROUGE State: LA Zip Code: 70810

Purpose of Disbursement: CREDIT CARD FEE Category/Type: 003

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: 00

Date of Disbursement: 09 / 21 / 2012

Amount of Each Disbursement this Period: 19.80  
Transaction ID : SB17.I761

**C. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 85431

City: BATON ROUGE State: LA Zip Code: 70810

Purpose of Disbursement: CREDIT CARD FEE Category/Type: 003

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: 00

Date of Disbursement: 09 / 24 / 2012

Amount of Each Disbursement this Period: 4.20  
Transaction ID : SB17.I763

**SUBTOTAL** of Disbursements This Page (optional) ..... 43.80

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 199 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 24 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I764</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 26 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I772</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 26 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>0.69<br><b>Transaction ID : SB17.I773</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6.16 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 200 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 26 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I782</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I791</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>5.17<br><b>Transaction ID : SB17.I792</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 11.62 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 201 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>19.80<br><b>Transaction ID : SB17.I793</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I794</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>19.80<br><b>Transaction ID : SB17.I795</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 41.85 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 202 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>39.30<br><b>Transaction ID : SB17.I796</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I797</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I798</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 45.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 203 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>87.30<br><b>Transaction ID : SB17.I799</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I800</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I801</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 80.84 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 204 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I802</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I803</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I804</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 13.57 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 205 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I805</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I806</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>1.27<br><b>Transaction ID : SB17.I807</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 15.52 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 206 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>97.80<br><b>Transaction ID : SB17.I813</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I814</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I815</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 110.10 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 207 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I816</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>10.05<br><b>Transaction ID : SB17.I817</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>78.30<br><b>Transaction ID : SB17.I818</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 90.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |
|---|---|-----------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 208 OF 261 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>4.20<br><b>Transaction ID : SB17.I823</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2012                        |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I824</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ANEDOT</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 21 / 2012                         |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>19.80<br><b>Transaction ID : SB17.I843</b> |
| City<br>BATON ROUGE  | State<br>LA   |   |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 26.25 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 209 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 22 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>2.25<br><b>Transaction ID : SB17.I849</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANEDOT</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2012                             |
| Mailing Address PO BOX 85431   |   | Amount of Each Disbursement this Period<br>0.88<br><b>Transaction ID : SB17.I859</b> |
| City<br>BATON ROUGE  | State<br>LA   |  |
| Zip Code<br>70810  | Purpose of Disbursement<br>CREDIT CARD FEE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. B&amp;H PHOTO</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 20 / 2012                               |
| Mailing Address 420 NINTH AVENUE   |   | Amount of Each Disbursement this Period<br>338.20<br><b>Transaction ID : SB17.I754</b> |
| City<br>NEW YORK   | State<br>NY   |  |
| Zip Code<br>10001  | Purpose of Disbursement<br>OFFICE EQUIPMENT   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 341.33 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 210 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BRW FUNDRAISING GROUP, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 3017 MAYVIEW ROAD   |  |                          | Amount of Each Disbursement this Period<br>887.00             |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27607        | Transaction ID : SB17.I448                                    |  |
| Purpose of Disbursement<br>FINANCE CONSULTING   |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BRW FUNDRAISING GROUP, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 3017 MAYVIEW ROAD   |  |                          | Amount of Each Disbursement this Period<br>2500.00            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27607        | Transaction ID : SB17.I513                                    |  |
| Purpose of Disbursement<br>FINANCE CONSULTING   |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BRW FUNDRAISING GROUP, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012 |  |
| Mailing Address 3017 MAYVIEW ROAD   |  |                          | Amount of Each Disbursement this Period<br>4309.00            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27607        | Transaction ID : SB17.I532                                    |  |
| Purpose of Disbursement<br>FINANCE CONSULTING   |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7696.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 211 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BRW FUNDRAISING GROUP, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012 |  |
| Mailing Address 3017 MAYVIEW ROAD   |  |                          | Amount of Each Disbursement this Period<br>2500.00            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27607        | Transaction ID : SB17.I568                                    |  |
| Purpose of Disbursement<br>FINANCE CONSULTING   |  | 003<br>Category/<br>Type |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District: 00   |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BRW FUNDRAISING GROUP, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012 |  |
| Mailing Address 3017 MAYVIEW ROAD   |  |                          | Amount of Each Disbursement this Period<br>2968.45            |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27607        | Transaction ID : SB17.I674                                    |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING/TRAVEL  |  | 003<br>Category/<br>Type |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District: 00   |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL CITY MAIL SERVICE</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 2660-124 DISCOVERY DRIVE  |  |                          | Amount of Each Disbursement this Period<br>297.54             |  |
| City<br>RALEIGH   | State<br>NC  | Zip Code<br>27616        | Transaction ID : SB17.I407                                    |  |
| Purpose of Disbursement<br>PRINTING   |  | 004<br>Category/<br>Type |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District: 00   |                          |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5765.99 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 212 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>594.00<br><b>Transaction ID : SB17.I450</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>203.00<br><b>Transaction ID : SB17.I461</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>198.94<br><b>Transaction ID : SB17.I471</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 995.94 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 213 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>971.66<br><b>Transaction ID : SB17.I478</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>1764.84<br><b>Transaction ID : SB17.I479</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00  |  |   |

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| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>270.90<br><b>Transaction ID : SB17.I512</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement POSTAGE<br>003<br>Category/Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3007.40 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 214 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>534.76<br><b>Transaction ID : SB17.I534</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 09 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>179.22<br><b>Transaction ID : SB17.I589</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 16 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>207.64<br><b>Transaction ID : SB17.I602</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 921.62 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 215 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>583.48<br><b>Transaction ID : SB17.I652</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>834.36<br><b>Transaction ID : SB17.I668</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>145.00<br><b>Transaction ID : SB17.I701</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1562.84 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 216 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>143.84<br><b>Transaction ID : SB17.I714</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITAL CITY MAIL SERVICE</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2012                          |
| Mailing Address 2660-124 DISCOVERY DRIVE                                       |  | Amount of Each Disbursement this Period<br>156.02<br><b>Transaction ID : SB17.I744</b> |
| City RALEIGH State NC Zip Code 27616   | Purpose of Disbursement PRINTING<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

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|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CAPITOL SUITES</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 13 / 2012                          |
| Mailing Address 200 C STREET, SE                                    |  | Amount of Each Disbursement this Period<br>236.71<br><b>Transaction ID : SB17.I851</b> |
| City WASHINGTON State DC Zip Code 20003                             | Purpose of Disbursement TRAVEL<br>002<br>Category/Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 536.57 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 217 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CENTURYLINK</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address PO BOX 4300  |   | Amount of Each Disbursement this Period<br>147.89<br><b>Transaction ID : SB17.I515</b> |
| City<br>CAROL STREAM   | State<br>IL   |  |
| Zip Code<br>60197  | Purpose of Disbursement<br>TELEPHONE/INTERNET SERVICE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CENTURYLINK</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012                          |
| Mailing Address PO BOX 4300  |   | Amount of Each Disbursement this Period<br>148.34<br><b>Transaction ID : SB17.I567</b> |
| City<br>CAROL STREAM   | State<br>IL   |  |
| Zip Code<br>60197  | Purpose of Disbursement<br>TELEPHONE/INTERNET SERVICE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CENTURYLINK</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 03 / 2012                          |
| Mailing Address PO BOX 4300  |   | Amount of Each Disbursement this Period<br>147.99<br><b>Transaction ID : SB17.I682</b> |
| City<br>CAROL STREAM   | State<br>IL   |  |
| Zip Code<br>60197  | Purpose of Disbursement<br>TELEPHONE/INTERNET SERVICE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 444.22 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 218 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CMDI</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 31 / 2012                          |
| Mailing Address 7704 LEESBURG PIKE   |   | Amount of Each Disbursement this Period<br>800.00<br><b>Transaction ID : SB17.I564</b> |
| City<br>FALLS CHURCH   | State<br>VA   |  |
| Zip Code<br>22043  | Purpose of Disbursement<br>SOFTWARE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CMDI</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 30 / 2012                          |
| Mailing Address 7704 LEESBURG PIKE   |   | Amount of Each Disbursement this Period<br>800.00<br><b>Transaction ID : SB17.I679</b> |
| City<br>FALLS CHURCH   | State<br>VA   |  |
| Zip Code<br>22043  | Purpose of Disbursement<br>SOFTWARE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CREATSEND.COM</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 23 / 2012                          |
| Mailing Address 04/3-5 STAPLETON AVENUE  |   | Amount of Each Disbursement this Period<br>122.40<br><b>Transaction ID : SB17.I551</b> |
| City<br>SUTHERLAND   | State<br>NS   |  |
| Zip Code<br>02232  | Purpose of Disbursement<br>WEBSITE SERVICES   | Category/<br>Type<br>004   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1722.40 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 219 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CREATSEND.COM</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 23 / 2012                          |
| Mailing Address 04/3-5 STAPLETON AVENUE                            |  | Amount of Each Disbursement this Period<br>122.40<br><b>Transaction ID : SB17.I635</b> |
| City SUTHERLAND State NS Zip Code 02232                            | Purpose of Disbursement WEBSITE SERVICES<br>Category/Type 004  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CREATSEND.COM</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 23 / 2012                          |
| Mailing Address 04/3-5 STAPLETON AVENUE                            |  | Amount of Each Disbursement this Period<br>122.40<br><b>Transaction ID : SB17.I757</b> |
| City SUTHERLAND State NS Zip Code 02232                            | Purpose of Disbursement WEBSITE SERVICES<br>Category/Type 004  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CROWNE PLAZA</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2012                          |
| Mailing Address 1480 CRYSTAL DRIVE                                |  | Amount of Each Disbursement this Period<br>620.70<br><b>Transaction ID : SB17.I559</b> |
| City ARLINGTON State VA Zip Code 22202                            | Purpose of Disbursement HOTEL<br>Category/Type 002   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 865.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 220 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DELTA AIR</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 13 / 2012                          |
| Mailing Address PO BOX 20706  |   | Amount of Each Disbursement this Period<br>505.20<br><b>Transaction ID : SB17.I722</b> |
| City ATLANTA State GA Zip Code 30320  | Purpose of Disbursement AIRFAIRE<br>Candidate Name<br>Category/Type 002   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2012                        |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>7.00<br><b>Transaction ID : SB17.I548</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 001   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I660</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 527.20 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 221 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012                        |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>5.00<br><b>Transaction ID : SB17.I685</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 001   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I704</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 21 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I727</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 35.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 222 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 27 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I729</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I746</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FIRST CITIZENS BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 25 / 2012                         |
| Mailing Address PO BOX 27131  |   | Amount of Each Disbursement this Period<br>15.00<br><b>Transaction ID : SB17.I778</b> |
| City RALEIGH State NC Zip Code 27611  | Purpose of Disbursement BANK FEE<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 45.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 223 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. FIRST CITIZENS BANK</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                                       |
| Mailing Address PO BOX 27131   |   | Amount of Each Disbursement this Period<br>9 0 0 . 0 0<br>5.00<br><b>Transaction ID : SB17.I861</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27611  | Purpose of Disbursement<br>BANK FEE   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. HEAVNER REALTY COMPANY</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 30 / 2012   |
| Mailing Address 2004 SOUTH BRIGHTLEAF BOULEVARD  |   | Amount of Each Disbursement this Period<br>4 5 0 . 0 0<br>450.00<br><b>Transaction ID : SB17.I576</b> |
| City<br>SMITHFIELD   | State<br>NC   |   |
| Zip Code<br>27577  | Purpose of Disbursement<br>RENT   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. HEAVNER REALTY COMPANY</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012   |
| Mailing Address 2004 SOUTH BRIGHTLEAF BOULEVARD  |   | Amount of Each Disbursement this Period<br>4 5 0 . 0 0<br>450.00<br><b>Transaction ID : SB17.I730</b> |
| City<br>SMITHFIELD   | State<br>NC   |   |
| Zip Code<br>27577  | Purpose of Disbursement<br>RENT   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 905.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 224 OF 261                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. HEAVNER REALTY COMPANY</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012                          |
| Mailing Address 2004 SOUTH BRIGHTLEAF BOULEVARD  |   | Amount of Each Disbursement this Period<br>450.00<br><b>Transaction ID : SB17.I783</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>RENT   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. IMPACT STRATEGIES</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2012                           |
| Mailing Address PO BOX 20875   |   | Amount of Each Disbursement this Period<br>4326.95<br><b>Transaction ID : SB17.I408</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27619  | Purpose of Disbursement<br>POLITICAL STRATEGY CONSULTING/TRAVEL   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. IMPACT STRATEGIES</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address PO BOX 20875   |   | Amount of Each Disbursement this Period<br>3000.00<br><b>Transaction ID : SB17.I472</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27619  | Purpose of Disbursement<br>POLITICAL STRATEGY CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7776.95 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 225 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. IMPACT STRATEGIES</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012                           |
| Mailing Address PO BOX 20875  |   | Amount of Each Disbursement this Period<br>3000.00<br><b>Transaction ID : SB17.I536</b> |
| City RALEIGH State NC Zip Code 27619  | Purpose of Disbursement POLITICAL STRATEGY CONSULTING<br>Candidate Name<br>Category/Type 001                                    |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. IMPACT STRATEGIES</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 09 / 2012                           |
| Mailing Address PO BOX 20875  |   | Amount of Each Disbursement this Period<br>3000.00<br><b>Transaction ID : SB17.I590</b> |
| City RALEIGH State NC Zip Code 27619  | Purpose of Disbursement POLITICAL STRATEGY CONSULTING<br>Candidate Name<br>Category/Type 001                                    |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. IMPACT STRATEGIES</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 05 / 2012                           |
| Mailing Address PO BOX 20875  |   | Amount of Each Disbursement this Period<br>3000.00<br><b>Transaction ID : SB17.I690</b> |
| City RALEIGH State NC Zip Code 27619  | Purpose of Disbursement POLITICAL STRATEGY CONSULTING<br>Candidate Name<br>Category/Type 001                                    |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 9000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                 |  |  |
|---|---|-----------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 226 OF 261 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LEE'S SIGNS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 914 E SANDERS ST  |   | Amount of Each Disbursement this Period<br>100.00<br><b>Transaction ID : SB17.I523</b> |
| City FOUR OAKS State NC Zip Code 27524-8528   | Purpose of Disbursement SIGNS<br>Candidate Name<br>Category/Type 004  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LEE'S SIGNS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address 914 E SANDERS ST  |   | Amount of Each Disbursement this Period<br>1400.00<br><b>Transaction ID : SB17.I524</b> |
| City FOUR OAKS State NC Zip Code 27524-8528   | Purpose of Disbursement SIGNS<br>Candidate Name<br>Category/Type 004  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MAJORITY CONNECTIONS, LLC</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address 10 PINNACLE ROAD  |   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.I410</b> |
| City DURHAM State NC Zip Code 27705   | Purpose of Disbursement MEDIA CONSULTING<br>Candidate Name<br>Category/Type 004   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 227 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MAJORITY CONNECTIONS, LLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |  |
| Mailing Address 10 PINNACLE ROAD  |  |                          | Amount of Each Disbursement this Period<br>2500.00            |  |
| City<br>DURHAM  | State<br>NC  | Zip Code<br>27705        | Transaction ID : SB17.I516                                    |  |
| Purpose of Disbursement<br>MEDIA CONSULTING   |  | Category/<br>Type<br>004 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MAJORITY CONNECTIONS, LLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012 |  |
| Mailing Address 10 PINNACLE ROAD  |  |                          | Amount of Each Disbursement this Period<br>2605.00            |  |
| City<br>DURHAM  | State<br>NC  | Zip Code<br>27705        | Transaction ID : SB17.I569                                    |  |
| Purpose of Disbursement<br>MEDIA CONSULTING   |  | Category/<br>Type<br>004 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MAJORITY CONNECTIONS, LLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2012 |  |
| Mailing Address 10 PINNACLE ROAD  |  |                          | Amount of Each Disbursement this Period<br>52.50              |  |
| City<br>DURHAM  | State<br>NC  | Zip Code<br>27705        | Transaction ID : SB17.I639                                    |  |
| Purpose of Disbursement<br>MEDIA  |  | Category/<br>Type<br>004 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5157.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 228 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MAJORITY CONNECTIONS, LLC</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012                         |
| Mailing Address 10 PINNACLE ROAD   |   | Amount of Each Disbursement this Period<br>21.00<br><b>Transaction ID : SB17.I669</b> |
| City<br>DURHAM   | State<br>NC   |   |
| Zip Code<br>27705  | Purpose of Disbursement<br>MEDIA  | Category/<br>Type<br>004  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MAJORITY CONNECTIONS, LLC</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 03 / 2012                           |
| Mailing Address 10 PINNACLE ROAD   |   | Amount of Each Disbursement this Period<br>2500.00<br><b>Transaction ID : SB17.I681</b> |
| City<br>DURHAM   | State<br>NC   |   |
| Zip Code<br>27705  | Purpose of Disbursement<br>MEDIA CONSULTING   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. METRO PRODUCTIONS</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012                          |
| Mailing Address 6005 CHAPEL HILL RD  |   | Amount of Each Disbursement this Period<br>447.28<br><b>Transaction ID : SB17.I566</b> |
| City<br>RALEIGH  | State<br>NC   |  |
| Zip Code<br>27607-5109   | Purpose of Disbursement<br>PRINTING   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2968.28 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 229 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MY CAMPAIGN STORE</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 04 / 2012 |
| Mailing Address PO BOX 596  |  | Amount of Each Disbursement this Period<br>7695.04            |
| City<br>JEFFERSONVILLE  | State<br>IN  |   |
| Zip Code<br>47131   |  | <b>Transaction ID : SB17.I689</b>                             |
| Purpose of Disbursement<br>SIGNS  | Category/<br>Type<br>004   |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. O3 STRATEGIES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012 |
| Mailing Address PO BOX 25363  |  | Amount of Each Disbursement this Period<br>225.00             |
| City<br>RALEIGH   | State<br>NC  |   |
| Zip Code<br>27611   |  | <b>Transaction ID : SB17.I453</b>                             |
| Purpose of Disbursement<br>WEBSITE SERVICES   | Category/<br>Type<br>004   |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. O3 STRATEGIES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 03 / 2012 |
| Mailing Address PO BOX 25363  |  | Amount of Each Disbursement this Period<br>50.00              |
| City<br>RALEIGH   | State<br>NC  |   |
| Zip Code<br>27611   |  | <b>Transaction ID : SB17.I511</b>                             |
| Purpose of Disbursement<br>WEBSITE SERVICES   | Category/<br>Type<br>004   |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7970.04 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 230 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. O3 STRATEGIES</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2012                         |
| Mailing Address PO BOX 25363   |   | Amount of Each Disbursement this Period<br>50.00<br><b>Transaction ID : SB17.I577</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27611  | Purpose of Disbursement<br>WEBSITE SERVICES   | Category/<br>Type<br>004  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. O3 STRATEGIES</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 01 / 2012                         |
| Mailing Address PO BOX 25363   |   | Amount of Each Disbursement this Period<br>50.00<br><b>Transaction ID : SB17.I860</b> |
| City<br>RALEIGH  | State<br>NC   |   |
| Zip Code<br>27611  | Purpose of Disbursement<br>WEBSITE SERVICES   | Category/<br>Type<br>004  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. OLEANDER COURTYARD ASSOCIATES</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 30 / 2012                           |
| Mailing Address PO BOX 4577  |   | Amount of Each Disbursement this Period<br>1250.00<br><b>Transaction ID : SB17.I575</b> |
| City<br>WILMINGTON   | State<br>NC   |   |
| Zip Code<br>28406  | Purpose of Disbursement<br>RENT   | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1350.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 231 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. OLEANDER COURTYARD ASSOCIATES</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012 |  |
| Mailing Address PO BOX 4577   |  |                          | Amount of Each Disbursement this Period<br>1250.00            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28406        | Transaction ID : SB17.I731                                    |  |
| Purpose of Disbursement<br>RENT   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. OLEANDER COURTYARD ASSOCIATES</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2012 |  |
| Mailing Address PO BOX 4577   |  |                          | Amount of Each Disbursement this Period<br>1250.00            |  |
| City<br>WILMINGTON  | State<br>NC  | Zip Code<br>28406        | Transaction ID : SB17.I784                                    |  |
| Purpose of Disbursement<br>RENT   |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PIRYX</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2012 |  |
| Mailing Address 144 2ND ST  |  |                          | Amount of Each Disbursement this Period<br>1.13               |  |
| City<br>SAN FRANCISCO   | State<br>CA  | Zip Code<br>94105-3716   | Transaction ID : SB17.I592                                    |  |
| Purpose of Disbursement<br>CREDIT CARD FEE  |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2501.13 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 232 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PIRYX</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 22 / 2012                         |
| Mailing Address 144 2ND ST  |  | Amount of Each Disbursement this Period<br>22.50<br><b>Transaction ID : SB17.I641</b> |
| City<br>SAN FRANCISCO   | State<br>CA  |   |
| Purpose of Disbursement<br>CREDIT CARD FEE  |  | Category/<br>Type<br>003  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. PIRYX</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2012                        |
| Mailing Address 144 2ND ST  |  | Amount of Each Disbursement this Period<br>9.00<br><b>Transaction ID : SB17.I733</b> |
| City<br>SAN FRANCISCO   | State<br>CA  |  |
| Purpose of Disbursement<br>CREDIT CARD FEE  |  | Category/<br>Type<br>003   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PORT CITY CHOP HOUSE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2012                          |
| Mailing Address 1981 EASTWOOD ROAD  |  | Amount of Each Disbursement this Period<br>343.86<br><b>Transaction ID : SB17.I787</b> |
| City<br>WILMINGTON  | State<br>NC  |  |
| Purpose of Disbursement<br>FOOD/BEVERAGE  |  | Category/<br>Type<br>003   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 375.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |



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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 233 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

Full Name (Last, First, Middle Initial)  
**A. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement SURVEY RESEARCH

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 07 / 19 / 2012

Amount of Each Disbursement this Period: 8000.00

Transaction ID : SB17.I418

Category/Type: 005

Full Name (Last, First, Middle Initial)  
**B. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement SURVEY RESEARCH

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 07 / 05 / 2012

Amount of Each Disbursement this Period: 8500.00

Transaction ID : SB17.I454

Category/Type: 005

Full Name (Last, First, Middle Initial)  
**C. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 07 / 05 / 2012

Amount of Each Disbursement this Period: 738.43

Transaction ID : SB17.I463

Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional)..... 17238.43

**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:<br>(check only one)          | PAGE 234 OF 261                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

Full Name (Last, First, Middle Initial)  
**A. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement SURVEY RESEARCH

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 09 / 05 / 2012

Amount of Each Disbursement this Period: 4650.00

Transaction ID : SB17.I696

Category/Type: 005

Full Name (Last, First, Middle Initial)  
**B. RISING TIDE MEDIA GROUP**

Mailing Address 226 SOUTH FAYETTE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 07 / 05 / 2012

Amount of Each Disbursement this Period: 5941.00

Transaction ID : SB17.I519

Category/Type: 004

Full Name (Last, First, Middle Initial)  
**C. RISING TIDE MEDIA GROUP**

Mailing Address 226 SOUTH FAYETTE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 09 / 07 / 2012

Amount of Each Disbursement this Period: 8700.00

Transaction ID : SB17.I703

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional)..... 19291.00

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 235 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RISING TIDE MEDIA GROUP</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 26 / 2012                           |
| Mailing Address 226 SOUTH FAYETTE   |  |                   | Amount of Each Disbursement this Period<br>5000.00<br><b>Transaction ID : SB17.I781</b> |
| City<br>ALEXANDRIA  | State<br>VA  | Zip Code<br>22314 |   |
| Purpose of Disbursement<br>MEDIA  | Candidate Name   |                   | Category/<br>Type<br>004  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: District: 00   |  |                   |   |

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SPALDING GROUP</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 20 / 2012                          |
| Mailing Address 2806 FRANKFORD AVENUE   |  |                   | Amount of Each Disbursement this Period<br>365.86<br><b>Transaction ID : SB17.I753</b> |
| City<br>LOUISVILLE  | State<br>KY  | Zip Code<br>40206 |  |
| Purpose of Disbursement<br>PRINTING   | Candidate Name   |                   | Category/<br>Type<br>006   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |  |
| State: District: 00   |  |                   |  |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. STAPLES</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                         |
| Mailing Address 500 STAPLES DRIVE   |  |                   | Amount of Each Disbursement this Period<br>30.48<br><b>Transaction ID : SB17.I522</b> |
| City<br>FRAMINGHAM  | State<br>MA  | Zip Code<br>01702 |   |
| Purpose of Disbursement<br>PRINTING   | Candidate Name   |                   | Category/<br>Type<br>001  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: District: 00   |  |                   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5396.34 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 236 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STAPLES</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 13 / 2012 |
| Mailing Address 500 STAPLES DRIVE   |  | Amount of Each Disbursement this Period<br>24.28         |
| City<br>FRAMINGHAM  | State<br>MA  |  |
| Purpose of Disbursement<br>PRINTING   | Zip Code<br>01702  |  |
| Candidate Name  | Category/<br>Type<br>003   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STAPLES</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 18 / 2012 |
| Mailing Address 500 STAPLES DRIVE   |  | Amount of Each Disbursement this Period<br>28.88         |
| City<br>FRAMINGHAM  | State<br>MA  |  |
| Purpose of Disbursement<br>OFFICE SUPPLIES  | Zip Code<br>01702  |  |
| Candidate Name  | Category/<br>Type<br>001   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STAPLES</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 22 / 2012 |
| Mailing Address 500 STAPLES DRIVE   |  | Amount of Each Disbursement this Period<br>76.27         |
| City<br>FRAMINGHAM  | State<br>MA  |  |
| Purpose of Disbursement<br>OFFICE SUPPLIES  | Zip Code<br>01702  |  |
| Candidate Name  | Category/<br>Type<br>001   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District: 00   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 129.43 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 237 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. STAPLES</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 22 / 2012                              |
| Mailing Address 500 STAPLES DRIVE  |   | Amount of Each Disbursement this Period<br>27.81<br><b>Transaction ID : SB17.I634</b> |
| City<br>FRAMINGHAM   | State<br>MA   |   |
| Zip Code<br>01702  | Purpose of Disbursement<br>OFFICE SUPPLIES  | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. STAPLES</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 27 / 2012                              |
| Mailing Address 500 STAPLES DRIVE  |   | Amount of Each Disbursement this Period<br>27.81<br><b>Transaction ID : SB17.I789</b> |
| City<br>FRAMINGHAM   | State<br>MA   |   |
| Zip Code<br>01702  | Purpose of Disbursement<br>OFFICE SUPPLIES  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STICKERGIANT.COM INC.</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 13 / 2012                               |
| Mailing Address 11755 NORTH 75TH STREET<br>SUITE B   |   | Amount of Each Disbursement this Period<br>320.39<br><b>Transaction ID : SB17.I542</b> |
| City<br>LONGMONT   | State<br>CO   |  |
| Zip Code<br>80503  | Purpose of Disbursement<br>PRINTING   | Category/<br>Type<br>006   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 376.01 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 238 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. STICKERGIANT.COM INC.</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 16 / 2012 |
| Mailing Address 11755 NORTH 75TH STREET<br>SUITE B                         |  | Amount of Each Disbursement this Period<br>441.99             |
| City LONGMONT State CO Zip Code 80503                                      | Purpose of Disbursement PRINTING<br>006<br>Category/Type |   |
| Candidate Name   |  | Transaction ID : SB17.I608                                    |
| Office Sought: House Senate President<br>State: District: 00               | Disbursement For: Primary General Other (specify)        |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. STRATEGIC MEDIA SERVICES, INC</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 21 / 2012 |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |   | Amount of Each Disbursement this Period<br>27390.00           |
| City WASHINGTON State DC Zip Code 20007  | Purpose of Disbursement MEDIA<br>004<br>Category/Type |   |
| Candidate Name   |   | Transaction ID : SB17.I621                                    |
| Office Sought: House Senate President<br>State: District: 00                       | Disbursement For: Primary General Other (specify)     |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. STRATEGIC MEDIA SERVICES, INC</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2012 |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |   | Amount of Each Disbursement this Period<br>28375.00           |
| City WASHINGTON State DC Zip Code 20007  | Purpose of Disbursement MEDIA<br>004<br>Category/Type |   |
| Candidate Name   |   | Transaction ID : SB17.I640                                    |
| Office Sought: House Senate President<br>State: District: 00                       | Disbursement For: Primary General Other (specify)     |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 56206.99 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 239 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |   |  |
|--|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRATEGIC MEDIA SERVICES, INC</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012 |  |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |   |  | Amount of Each Disbursement this Period<br>41278.00           |  |
| City<br>WASHINGTON   | State<br>DC   | Zip Code<br>20007  | Transaction ID : SB17.I659                                    |  |
| Purpose of Disbursement<br>MEDIA   |   | Category/<br>Type<br>004   |   |  |
| Candidate Name   |   |  |   |  |
| Office Sought:   | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:   | District: 00  |  |   |  |

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|--|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRATEGIC MEDIA SERVICES, INC</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012 |  |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |   |  | Amount of Each Disbursement this Period<br>44868.00           |  |
| City<br>WASHINGTON   | State<br>DC   | Zip Code<br>20007  | Transaction ID : SB17.I697                                    |  |
| Purpose of Disbursement<br>MEDIA   |   | Category/<br>Type<br>004   |   |  |
| Candidate Name   |   |  |   |  |
| Office Sought:   | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:   | District: 00  |  |   |  |

|  |   |  |   |  |
|--|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRATEGIC MEDIA SERVICES, INC</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2012 |  |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |   |  | Amount of Each Disbursement this Period<br>45968.00           |  |
| City<br>WASHINGTON   | State<br>DC   | Zip Code<br>20007  | Transaction ID : SB17.I742                                    |  |
| Purpose of Disbursement<br>MEDIA   |   | Category/<br>Type<br>004   |   |  |
| Candidate Name   |   |  |   |  |
| Office Sought:   | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:   | District: 00  |  |   |  |

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|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 132114.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |           |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 240 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRATEGIC MEDIA SERVICES, INC</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 25 / 2012                            |
| Mailing Address 3299 K STREET, NW<br>SUITE 200                                     |  | Amount of Each Disbursement this Period<br>39968.00<br><b>Transaction ID : SB17.I774</b> |
| City WASHINGTON State DC Zip Code 20007  | Purpose of Disbursement MEDIA<br>004<br>Category/Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TABLE TOPPERS</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                          |
| Mailing Address 1110 WEST BROAD STREET                             |  | Amount of Each Disbursement this Period<br>761.87<br><b>Transaction ID : SB17.I419</b> |
| City DUNN State NC Zip Code 28334                                  | Purpose of Disbursement EQUIPMENT RENTAL<br>003<br>Category/Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District: 00  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE COMPLIANCE CONSULTING COMPANY OF VIRGINIA, LLC</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2012                           |
| Mailing Address PO BOX 365  |  | Amount of Each Disbursement this Period<br>2950.00<br><b>Transaction ID : SB17.I673</b> |
| City MCLEAN State VA Zip Code 22101   | Purpose of Disbursement COMPLIANCE CONSULTING<br>001<br>Category/Type  |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 43679.87 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 241 OF 261                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. THE FORD FIRM, PLLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 10 / 2012 |  |  |
| Mailing Address PO BOX 701  |  |                          | Amount of Each Disbursement this Period<br>2805.00            |  |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27528        | Transaction ID : SB17.I543                                    |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type<br>001 |   |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District: 00   |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. THE FORD FIRM, PLLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2012 |  |  |
| Mailing Address PO BOX 701  |  |                          | Amount of Each Disbursement this Period<br>906.25             |  |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27528        | Transaction ID : SB17.I544                                    |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type<br>001 |   |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District: 00   |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. THE FORD FIRM, PLLC</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2012 |  |  |
| Mailing Address PO BOX 701  |  |                          | Amount of Each Disbursement this Period<br>2262.50            |  |  |
| City<br>CLAYTON   | State<br>NC  | Zip Code<br>27528        | Transaction ID : SB17.I545                                    |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type<br>001 |   |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District: 00   |  |                          |   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5973.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 242 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. THE FORD FIRM, PLLC</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 17 / 2012                           |
| Mailing Address PO BOX 701   |   | Amount of Each Disbursement this Period<br>6000.00<br><b>Transaction ID : SB17.I748</b> |
| City<br>CLAYTON  | State<br>NC   |   |
| Zip Code<br>27528  | Purpose of Disbursement<br>COMPLIANCE CONSULTING  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. THE LOG CABIN STEAKHOUSE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 12 / 2012                          |
| Mailing Address 2491 HIGHWAY 70 EAST   |   | Amount of Each Disbursement this Period<br>729.26<br><b>Transaction ID : SB17.I541</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>FOOD/BEVERAGE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TIME WARNER CABLE</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2012                          |
| Mailing Address PO BOX 70872   |   | Amount of Each Disbursement this Period<br>133.99<br><b>Transaction ID : SB17.I565</b> |
| City<br>CHARLOTTE  | State<br>NC   |  |
| Zip Code<br>28272  | Purpose of Disbursement<br>INTERNET SERVICE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6863.25 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 243 OF 261 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TIME WARNER CABLE</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012                          |
| Mailing Address PO BOX 70872   |   | Amount of Each Disbursement this Period<br>133.99<br><b>Transaction ID : SB17.I716</b> |
| City<br>CHARLOTTE  | State<br>NC   |  |
| Zip Code<br>28272  | Purpose of Disbursement<br>INTERNET SERVICE   | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TOWN OF SMITHFIELD</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 26 / 2012                          |
| Mailing Address 350 EAST MARKET STREET   |   | Amount of Each Disbursement this Period<br>119.74<br><b>Transaction ID : SB17.I556</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>UTILITIES  | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TOWN OF SMITHFIELD</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2012                          |
| Mailing Address 350 EAST MARKET STREET   |   | Amount of Each Disbursement this Period<br>295.55<br><b>Transaction ID : SB17.I672</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>UTILITIES  | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 549.28 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 244 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TOWN OF SMITHFIELD</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 21 / 2012                          |
| Mailing Address 350 EAST MARKET STREET   |   | Amount of Each Disbursement this Period<br>266.44<br><b>Transaction ID : SB17.I756</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>UTILITIES  | Category/<br>Type<br>001   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2012                          |
| Mailing Address 201 NORTH 3RD STREET   |   | Amount of Each Disbursement this Period<br>143.55<br><b>Transaction ID : SB17.I547</b> |
| City<br>SMITHFIELD   | State<br>NC   |  |
| Zip Code<br>27577  | Purpose of Disbursement<br>POSTAGE  | Category/<br>Type<br>003   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 20 / 2012                         |
| Mailing Address 201 NORTH 3RD STREET   |   | Amount of Each Disbursement this Period<br>45.00<br><b>Transaction ID : SB17.I550</b> |
| City<br>SMITHFIELD   | State<br>NC   |   |
| Zip Code<br>27577  | Purpose of Disbursement<br>POSTAGE  | Category/<br>Type<br>001  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District: 00   |   |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 454.99 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 245 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2012                          |
| Mailing Address 201 NORTH 3RD STREET  |  |                   | Amount of Each Disbursement this Period<br>139.05<br><b>Transaction ID : SB17.I574</b> |
| City<br>SMITHFIELD  | State<br>NC  | Zip Code<br>27577 |  |
| Purpose of Disbursement<br>POSTAGE  | Candidate Name   |                   | Category/<br>Type<br>003   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |  |
| State: District: 00   |  |                   |  |

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|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 06 / 2012                          |
| Mailing Address 201 NORTH 3RD STREET  |  |                   | Amount of Each Disbursement this Period<br>161.10<br><b>Transaction ID : SB17.I591</b> |
| City<br>SMITHFIELD  | State<br>NC  | Zip Code<br>27577 |  |
| Purpose of Disbursement<br>POSTAGE  | Candidate Name   |                   | Category/<br>Type<br>003   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |  |
| State: District: 00   |  |                   |  |

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 09 / 2012                          |
| Mailing Address 201 NORTH 3RD STREET  |  |                   | Amount of Each Disbursement this Period<br>180.45<br><b>Transaction ID : SB17.I597</b> |
| City<br>SMITHFIELD  | State<br>NC  | Zip Code<br>27577 |  |
| Purpose of Disbursement<br>POSTAGE  | Candidate Name   |                   | Category/<br>Type<br>003   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |  |
| State: District: 00   |  |                   |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 480.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 246 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                                 |  |  |
|---|--|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b>   |  |                                 | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 15 / 2012</b> |  |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                                 | Amount of Each Disbursement this Period<br><b>272.25</b>             |  |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b>        | Transaction ID : <b>SB17.I604</b>                                    |  |
| Purpose of Disbursement<br><b>POSTAGE</b>   |  | Category/<br>Type<br><b>003</b> |  |  |
| Candidate Name  |  |                                 |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                 |  |  |
| State: District: <b>00</b>  |  |                                 |  |  |

|   |  |                                 |  |  |
|---|--|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b>   |  |                                 | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 13 / 2012</b> |  |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                                 | Amount of Each Disbursement this Period<br><b>24.75</b>              |  |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b>        | Transaction ID : <b>SB17.I607</b>                                    |  |
| Purpose of Disbursement<br><b>POSTAGE</b>   |  | Category/<br>Type<br><b>001</b> |  |  |
| Candidate Name  |  |                                 |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                 |  |  |
| State: District: <b>00</b>  |  |                                 |  |  |

|   |  |                                 |  |  |
|---|--|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b>   |  |                                 | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 16 / 2012</b> |  |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                                 | Amount of Each Disbursement this Period<br><b>9.00</b>               |  |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b>        | Transaction ID : <b>SB17.I615</b>                                    |  |
| Purpose of Disbursement<br><b>POSTAGE</b>   |  | Category/<br>Type<br><b>001</b> |  |  |
| Candidate Name  |  |                                 |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                 |  |  |
| State: District: <b>00</b>  |  |                                 |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>306.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 247 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 18 / 2012</b>   |
| Mailing Address <b>201 NORTH 3RD STREET</b>                                       |   | Amount of Each Disbursement this Period<br><b>117.00</b>   |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>                      | Purpose of Disbursement<br><b>POSTAGE</b> <b>001</b><br>Category/Type |  |
| Candidate Name  |   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: <b>00</b>  |   |  |

**Transaction ID : SB17.I620**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 23 / 2012</b>   |
| Mailing Address <b>201 NORTH 3RD STREET</b>                                       |   | Amount of Each Disbursement this Period<br><b>112.50</b>   |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>                      | Purpose of Disbursement<br><b>POSTAGE</b> <b>003</b><br>Category/Type |  |
| Candidate Name  |   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: <b>00</b>  |   |  |

**Transaction ID : SB17.I637**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 24 / 2012</b>   |
| Mailing Address <b>201 NORTH 3RD STREET</b>                                       |   | Amount of Each Disbursement this Period<br><b>106.65</b>   |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>                      | Purpose of Disbursement<br><b>POSTAGE</b> <b>003</b><br>Category/Type |  |
| Candidate Name  |   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: <b>00</b>  |   |  |

**Transaction ID : SB17.I638**

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>336.15</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 248 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |  |
|---|--|--------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 29 / 2012</b>                         |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                          | Amount of Each Disbursement this Period<br><b>36.00</b><br>Transaction ID : <b>SB17.I680</b> |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b> |  |
| Purpose of Disbursement<br><b>POSTAGE</b>   | Candidate Name   |                          | Category/<br>Type<br><b>001</b>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |
| State: District: <b>00</b>  |  |                          |  |

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|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 11 / 2012</b>                          |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                          | Amount of Each Disbursement this Period<br><b>135.00</b><br>Transaction ID : <b>SB17.I712</b> |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b> |   |
| Purpose of Disbursement<br><b>POSTAGE</b>   | Candidate Name   |                          | Category/<br>Type<br><b>001</b>   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: <b>00</b>  |  |                          |   |

|   |  |                          |   |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 12 / 2012</b>                          |
| Mailing Address <b>201 NORTH 3RD STREET</b>   |  |                          | Amount of Each Disbursement this Period<br><b>121.05</b><br>Transaction ID : <b>SB17.I713</b> |
| City<br><b>SMITHFIELD</b>   | State<br><b>NC</b>   | Zip Code<br><b>27577</b> |   |
| Purpose of Disbursement<br><b>POSTAGE</b>   | Candidate Name   |                          | Category/<br>Type<br><b>003</b>   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |
| State: District: <b>00</b>  |  |                          |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>292.05</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 249 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b>                                |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 17 / 2012</b> |
| Mailing Address <b>201 NORTH 3RD STREET</b>  |  | Amount of Each Disbursement this Period<br><b>454.50</b>             |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>   | Purpose of Disbursement <b>POSTAGE</b> Category/Type <b>003</b>  |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I720</b>                                    |
| 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: <b>00</b>   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED STATES POSTAL SERVICE</b>                                |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>08 / 30 / 2012</b> |
| Mailing Address <b>201 NORTH 3RD STREET</b>  |  | Amount of Each Disbursement this Period<br><b>111.60</b>             |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>   | Purpose of Disbursement <b>POSTAGE</b> Category/Type <b>003</b>  |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I732</b>                                    |
| 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: <b>00</b>   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED STATES POSTAL SERVICE</b>                                |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 17 / 2012</b> |
| Mailing Address <b>201 NORTH 3RD STREET</b>  |  | Amount of Each Disbursement this Period<br><b>45.00</b>              |
| City <b>SMITHFIELD</b> State <b>NC</b> Zip Code <b>27577</b>   | Purpose of Disbursement <b>POSTAGE</b> Category/Type <b>001</b>  |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I740</b>                                    |
| 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: <b>00</b>   |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>611.10</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 250 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED STATES POSTAL SERVICE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 20 / 2012 |  |
| Mailing Address 201 NORTH 3RD STREET  |  |                          | Amount of Each Disbursement this Period<br>471.60             |  |
| City<br>SMITHFIELD  | State<br>NC  | Zip Code<br>27577        | Transaction ID : SB17.I850                                    |  |
| Purpose of Disbursement<br>POSTAGE  |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VONAGE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 25 / 2012 |  |
| Mailing Address 23 MAIN STREET  |  |                          | Amount of Each Disbursement this Period<br>84.58              |  |
| City<br>HOLMDEL   | State<br>NJ  | Zip Code<br>07733        | Transaction ID : SB17.I552                                    |  |
| Purpose of Disbursement<br>TELEPHONE SERVICE  |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. VONAGE</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 25 / 2012 |  |
| Mailing Address 23 MAIN STREET  |  |                          | Amount of Each Disbursement this Period<br>110.41             |  |
| City<br>HOLMDEL   | State<br>NJ  | Zip Code<br>07733        | Transaction ID : SB17.I553                                    |  |
| Purpose of Disbursement<br>TELEPHONE SERVICE  |  | Category/<br>Type<br>001 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District: 00   |  |                          |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 666.59 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 251 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. VONAGE</b>   |  |                   | Date of Disbursement<br><input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 23 MAIN STREET  |  |                   | <input type="text"/> / <input type="text"/> / <input type="text"/>                         |
| City<br>HOLMDEL   | State<br>NJ  | Zip Code<br>07733 | Amount of Each Disbursement this Period<br><input type="text"/>                            |
| Purpose of Disbursement<br>TELEPHONE SERVICE  | Candidate Name   |                   | <input type="text"/> 69.32<br><b>Transaction ID : SB17.I728</b>                            |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   | <input type="text"/> 001<br>Category/Type  |
| State:<br>District: 00  |  |                   |  |

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VONAGE</b>   |  |                   | Date of Disbursement<br><input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 23 MAIN STREET  |  |                   | <input type="text"/> / <input type="text"/> / <input type="text"/>                         |
| City<br>HOLMDEL   | State<br>NJ  | Zip Code<br>07733 | Amount of Each Disbursement this Period<br><input type="text"/>                            |
| Purpose of Disbursement<br>TELEPHONE SERVICE  | Candidate Name   |                   | <input type="text"/> 69.32<br><b>Transaction ID : SB17.I779</b>                            |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   | <input type="text"/> 001<br>Category/Type  |
| State:<br>District: 00  |  |                   |  |

|   |  |                   |  |
|---|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. WAL-MART</b>   |  |                   | Date of Disbursement<br><input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 702 SW 8TH STREET   |  |                   | <input type="text"/> / <input type="text"/> / <input type="text"/>                         |
| City<br>BENTONVILLE   | State<br>AR  | Zip Code<br>72716 | Amount of Each Disbursement this Period<br><input type="text"/>                            |
| Purpose of Disbursement<br>FOOD/BEVERAGE  | Candidate Name   |                   | <input type="text"/> 92.42<br><b>Transaction ID : SB17.I558</b>                            |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   | <input type="text"/> 007<br>Category/Type  |
| State:<br>District: 00  |  |                   |  |

|  |                             |
|--|-----------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text"/> 231.06 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 252 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WAL-MART</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 30 / 2012                         |
| Mailing Address 702 SW 8TH STREET                             |  | Amount of Each Disbursement this Period<br>15.11<br><b>Transaction ID : SB17.I563</b> |
| City BENTONVILLE State AR Zip Code 72716                      | Purpose of Disbursement DECORATIONS<br>007<br>Category/Type  |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WAL-MART</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 20 / 2012                         |
| Mailing Address 702 SW 8TH STREET                             |  | Amount of Each Disbursement this Period<br>31.03<br><b>Transaction ID : SB17.I628</b> |
| City BENTONVILLE State AR Zip Code 72716                      | Purpose of Disbursement OFFICE EQUIPMENT<br>001<br>Category/Type   |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. WINFREY &amp; COMPANY</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 05 / 2012                           |
| Mailing Address 228 SOUTH WASHINGTON STREET<br>SUITE B-20                  |  | Amount of Each Disbursement this Period<br>1827.97<br><b>Transaction ID : SB17.I429</b> |
| City ALEXANDRIA State VA Zip Code 22314                                    | Purpose of Disbursement FUNDRAISING CONSULTING<br>003<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00  |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1874.11 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 253 OF 261                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WINFREY &amp; COMPANY</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 19 / 2012 |
| Mailing Address 228 SOUTH WASHINGTON STREET<br>SUITE B-20                  |  | Amount of Each Disbursement this Period<br>2500.00            |
| City ALEXANDRIA State VA Zip Code 22314                                    | Purpose of Disbursement<br>FUNDRAISING CONSULTING<br>Category/Type<br>003  |   |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING                          |  | Transaction ID : SB17.I537                                    |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WINFREY &amp; COMPANY</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 12 / 2012 |
| Mailing Address 228 SOUTH WASHINGTON STREET<br>SUITE B-20                  |  | Amount of Each Disbursement this Period<br>5858.66            |
| City ALEXANDRIA State VA Zip Code 22314                                    | Purpose of Disbursement<br>FUNDRAISING CONSULTING<br>Category/Type<br>003  |   |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING                          |  | Transaction ID : SB17.I717                                    |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JOHNSTON RW</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2012 |
| Mailing Address PO BOX 137                                       |  | Amount of Each Disbursement this Period<br>52.48              |
| City SMITHFIELD State NC Zip Code 27577-0123                     | Purpose of Disbursement<br>IN-KIND CONTRIBUTION<br>Category/Type   |   |
| Purpose of Disbursement<br>IN-KIND CONTRIBUTION                  |  | Transaction ID : SB17.3125                                    |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District: 00  |  |   |
|  |  | IN-KIND FOOD/BEVERAGE   |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 8411.14   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 430890.80 |

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

|   |  |                 |  |  |  |
|---|--|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 254 OF 261 |  |  |  |
|   | <input type="checkbox"/> 17<br><input checked="" type="checkbox"/> 20a<br><input type="checkbox"/> 18<br><input type="checkbox"/> 20b<br><input type="checkbox"/> 19a<br><input type="checkbox"/> 20c<br><input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DAVID ROUZER</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 10 / 2012 |
| Mailing Address 108 PEACH ORCHARD DR  |   | Amount of Each Disbursement this Period<br>772.69             |
| City BENSON State NC Zip Code 27504-8304  | Purpose of Disbursement REIMBURSEMENT OF 2011 Q3 IN-KINDS<br>Candidate Name<br>Category/Type 010                                |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Transaction ID : SB17.I595<br>SEE SCHEDULE A LINE 11(D)       |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DAVID ROUZER</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 10 / 2012 |
| Mailing Address 108 PEACH ORCHARD DR  |   | Amount of Each Disbursement this Period<br>2514.22            |
| City BENSON State NC Zip Code 27504-8304  | Purpose of Disbursement REIMBURSEMENT OF 2011 Q3 AND Q4 IN-KINDS<br>Candidate Name<br>Category/Type 010                         |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Transaction ID : SB17.I596<br>SEE SCHEDULE A LINE 11(D)       |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ELLA ANN HOLDING</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2012 |
| Mailing Address 519 ROSEWOOD DRIVE  |   | Amount of Each Disbursement this Period<br>1000.00            |
| City SMITHFIELD State NC Zip Code 27577   | Purpose of Disbursement PARTIAL REFUND OF 6/29/12 CONTRIBUTION<br>Candidate Name<br>Category/Type 010                           |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Transaction ID : SB20A.I751<br>SEE SCHEDULE A LINE 11(A)      |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4286.91 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |  |   |
|---|--|---|--|---|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   |   | PAGE 255 OF 261  |   |
|   | <input type="checkbox"/> 17<br><input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |

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)  
**David Rouzer for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. GEORGE HOWARD</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 25 / 2012 |
| Mailing Address 2713 LOCHMORE DRIVE   |  | Amount of Each Disbursement this Period<br>500.00             |
| City RALEIGH  | State NC   |   |
| Zip Code 27608  | Purpose of Disbursement<br>PARTIAL REFUND OF 9/14/12 CONTRIBUTION  | <b>Transaction ID : SB20A.I750</b>                            |
| Candidate Name  | Category/Type<br>010   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | SEE SCHEDULE A LINE 11(A)                                     |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. VERNON S RITCHEY</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 20 / 2012 |
| Mailing Address 3994 BOBBITT ROAD   |  | Amount of Each Disbursement this Period<br>100.00             |
| City KITTRELL   | State NC   |   |
| Zip Code 27544  | Purpose of Disbursement<br>REFUND OF 9/13/12 CONTRIBUTION  | <b>Transaction ID : SB20A.I752</b>                            |
| Candidate Name  | Category/Type<br>010   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | SEE SCHEDULE A LINE 11(A)                                     |
| State: District: 00   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ROUSECO, INC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 22 / 2012 |
| Mailing Address PO BOX 2495   |  | Amount of Each Disbursement this Period<br>500.00             |
| City KINSTON  | State NC   |   |
| Zip Code 28502  | Purpose of Disbursement<br>REFUND OF 8/20/12 CONTRIBUTION  | <b>Transaction ID : SB20A.I705</b>                            |
| Candidate Name  | Category/Type<br>010   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | SEE SCHEDULE A LINE 11(A)                                     |
| State: District: 00   |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5386.91 |

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

|   |                                      |                                    |  |                                    |
|---|--------------------------------------|------------------------------------|--|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 256 OF 261                                |                                    |
|   | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input checked="" type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DANNY MCCOMAS CAMPAIGN</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 27 / 2012</b> |
| Mailing Address <b>PO BOX 2274</b>  |  | Amount of Each Disbursement this Period<br><b>500.00</b>             |
| City <b>WILMINGTON</b>  | State <b>NC</b>  | Zip Code <b>28402</b>  |
| Purpose of Disbursement<br><b>REFUND OF 9/27/12 CONTRIBUTION</b>            | Category/<br>Type<br><b>010</b>  | <b>Transaction ID : SB20C.I833</b>                                   |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President          | SEE SCHEDULE A LINE 11(C)  |
| State: District: <b>00</b>  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

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

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

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>500.00</b> |



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 257 OF 261   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)

**David Rouzer for Congress**

|   |   |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>THOMAS N BUGBEE JR</b> | Nature of Debt (Purpose):<br>CAMPAIGN CONSULTING/TRAVEL |
| Mailing Address 708 SQUIRE LANE   |   |
| City State Zip Code<br>WILMINGTON NC 28411  |   |

|  |                                |  |
|--|--------------------------------|--|
| Outstanding Balance Beginning This Period<br>2787.82 | <b>Transaction ID : 01</b>     |  |
| Amount Incurred This Period<br>1771.51               | Payment This Period<br>2787.82 | Outstanding Balance at Close of This Period<br>1771.51 |

|   |  |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>BOB HARRIS</b> | Nature of Debt (Purpose):<br>RESEARCH CONSULTING |
| Mailing Address 3806 LASSITER MILL ROAD   |  |
| City State Zip Code<br>RALEIGH NC 27609   |  |

|  |                                |   |
|--|--------------------------------|---|
| Outstanding Balance Beginning This Period<br>2000.00 | <b>Transaction ID : 010</b>    |   |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>2000.00 | Outstanding Balance at Close of This Period<br>0.00 |

|   |  |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>TOWNES MAXWELL</b> | Nature of Debt (Purpose):<br>CAMPAIGN CONSULTING |
| Mailing Address 1011 SOUTHPOINT CROSSING DRIVE  |  |
| City State Zip Code<br>DURHAM NC 27713  |  |

|  |                                |   |
|--|--------------------------------|---|
| Outstanding Balance Beginning This Period<br>3020.00 | <b>Transaction ID : 011</b>    |   |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>3020.00 | Outstanding Balance at Close of This Period<br>0.00 |

|  |         |
|--|---------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | 1771.51 |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             |         |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          |         |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |         |

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

NAME OF COMMITTEE (In Full)  
**David Rouzer for Congress**

|   |   |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>DODIE RENFER</b> | Nature of Debt (Purpose):<br>CAMPAIGN CONSULTING / COMPUTER EQUIPMENT |
| Mailing Address 721 RAYMOND DRIVE   |   |
| City State Zip Code<br>CLAYTON NC 27527   |   |

|   |                             |  |
|---|-----------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : 02</b>  |  |
| Amount Incurred This Period<br>5090.72            | Payment This Period<br>0.00 | Outstanding Balance at Close of This Period<br>5090.72 |

|   |                                    |
|---|------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>RISING TIDE MEDIA GROUP, LLC</b> | Nature of Debt (Purpose):<br>MEDIA |
| Mailing Address 226 SOUTH FAYETTE   |                                    |
| City State Zip Code<br>ALEXANDRIA VA 22314  |                                    |

|  |                                |   |
|--|--------------------------------|---|
| Outstanding Balance Beginning This Period<br>5941.00 | <b>Transaction ID : 03</b>     |   |
| Amount Incurred This Period<br>60515.57              | Payment This Period<br>5941.00 | Outstanding Balance at Close of This Period<br>60515.57 |

|  |                                       |
|--|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>CAPITAL CITY MAIL SERVICE</b> | Nature of Debt (Purpose):<br>PRINTING |
| Mailing Address 2660-124 DISCOVERY DRIVE   |                                       |
| City State Zip Code<br>RALEIGH NC 27616  |                                       |

|  |                                |   |
|--|--------------------------------|---|
| Outstanding Balance Beginning This Period<br>4029.98 | <b>Transaction ID : 04</b>     |   |
| Amount Incurred This Period<br>887.62                | Payment This Period<br>4029.98 | Outstanding Balance at Close of This Period<br>887.62 |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | 66493.91 |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          |          |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |          |

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**David Rouzer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**PUBLIC OPINION STRATEGIES**

Nature of Debt (Purpose):  
**SURVEY**

Mailing Address 214 NORTH FAYETTE STREET

City State Zip Code  
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

21888.43

**Transaction ID : 05**

Amount Incurred This Period

5500.00

Payment This Period

21888.43

Outstanding Balance at Close of This Period

5500.00

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

Nature of Debt (Purpose):  
**AIRFARE**

Mailing Address PO BOX 485

City State Zip Code  
SANDSTON VA 23150

Outstanding Balance Beginning This Period

0.00

**Transaction ID : 06**

Amount Incurred This Period

1977.37

Payment This Period

0.00

Outstanding Balance at Close of This Period

1977.37

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

Nature of Debt (Purpose):  
**EQUIPMENT RENTAL**

Mailing Address 1110 WEST BROAD STREET

City State Zip Code  
DUNN NC 28334

Outstanding Balance Beginning This Period

761.87

**Transaction ID : 012**

Amount Incurred This Period

0.00

Payment This Period

761.87

Outstanding Balance at Close of This Period

0.00

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

7477.37

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

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 260 OF 261   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)

**David Rouzer for Congress**

|  |                 |  |
|--|-----------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>WINFREY &amp; COMPANY</b> |                 | Nature of Debt (Purpose):<br><b>FUNDRAISING CONSULTING</b> |
| Mailing Address <b>228 SOUTH WASHINGTON STREET<br/>SUITE B-20</b>                                |                 |  |
| City <b>ALEXANDRIA</b>   | State <b>VA</b> | Zip Code <b>22314</b>                                      |

|   |   |  |
|---|---|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="1827.97"/> | <b>Transaction ID : 013</b>                                 |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="1827.97"/> | Outstanding Balance at Close of This Period<br><input type="text" value="0.00"/> |

|  |                 |   |
|--|-----------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>THE FORD FIRM, PLLC</b> |                 | Nature of Debt (Purpose):<br><b>COMPLIANCE CONSULTING</b> |
| Mailing Address <b>PO BOX 701</b>  |                 |   |
| City <b>CLAYTON</b>  | State <b>NC</b> | Zip Code <b>27528</b>                                     |

|   |   |  |
|---|---|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="3711.25"/> | <b>Transaction ID : 014</b>                                 |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="3711.25"/> | Outstanding Balance at Close of This Period<br><input type="text" value="0.00"/> |

|  |                 |   |
|--|-----------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>ADVANTAGE</b> |                 | Nature of Debt (Purpose):<br><b>PHONE BANKS</b> |
| Mailing Address <b>2300 CLAREDON BOULEVARD<br/>SUITE1004</b>                         |                 |   |
| City <b>ARLINGTON</b>  | State <b>VA</b> | Zip Code <b>22201</b>                           |

|   |   |  |
|---|---|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="2335.11"/> | <b>Transaction ID : 015</b>                                 |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="2335.11"/> | Outstanding Balance at Close of This Period<br><input type="text" value="0.00"/> |

|  |                                   |
|--|-----------------------------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | <input type="text" value="0.00"/> |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             | <input type="text"/>              |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          | <input type="text"/>              |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/>              |

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

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 261 OF 261   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)

**David Rouzer for Congress**

|   |  |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>BRW FUNDRAISING GROUP, LLC</b> | Nature of Debt (Purpose):<br><b>FUNDRAISING CONSULTING</b> |
| Mailing Address 3017 MAYVIEW ROAD   |  |
| City State Zip Code<br><b>RALEIGH NC 27607</b>  |  |

|   |                                       |  |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period<br><b>3387.00</b> | <b>Transaction ID : 016</b>           |  |
| Amount Incurred This Period<br><b>0.00</b>                  | Payment This Period<br><b>3387.00</b> | Outstanding Balance at Close of This Period<br><b>0.00</b> |

|   |   |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>IMPACT STRATEGIES, INC</b> | Nature of Debt (Purpose):<br><b>POLITICAL STRATEGY CONSULTING</b> |
| Mailing Address 3901 BARRETT DRIVE SUITE202   |   |
| City State Zip Code<br><b>RALEIGH NC 27609</b>  |   |

|   |                                       |  |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period<br><b>7326.95</b> | <b>Transaction ID : 017</b>           |  |
| Amount Incurred This Period<br><b>0.00</b>                  | Payment This Period<br><b>7326.95</b> | Outstanding Balance at Close of This Period<br><b>0.00</b> |

|   |  |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>MAJORITY CONNECTIONS</b> | Nature of Debt (Purpose):<br><b>MEDIA CONSULTING</b> |
| Mailing Address 10 PINNACLE ROAD  |  |
| City State Zip Code<br><b>DURHAM NC 27705</b>   |  |

|   |                                       |  |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period<br><b>2000.00</b> | <b>Transaction ID : 018</b>           |  |
| Amount Incurred This Period<br><b>0.00</b>                  | Payment This Period<br><b>2000.00</b> | Outstanding Balance at Close of This Period<br><b>0.00</b> |

|  |                 |
|--|-----------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | <b>0.00</b>     |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             | <b>75742.79</b> |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          | <b>0.00</b>     |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | <b>75742.79</b> |