

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

BOB ETHERIDGE FOR CONGRESS COMMITTEE

ADDRESS (number and street)

POST OFFICE BOX 28001

Check if different than previously reported. (ACC)

RALEIGH

NC

27811

2. **FEC IDENTIFICATION NUMBER**

C00311555

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT  NEW OR  AMENDED

NC 02

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

In the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2003 through 09 30 2003

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 Andrea Bell

Signature of Treasurer Electronically Filed by Andrea Bell Date 10 15 2003

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

**Write or Type Committee Name**

BOB ETHERIDGE FOR CONGRESS COMMITTEE

Report Covering the Period: From: <sup>M M</sup> 0 7 <sup>D D</sup> 0 1 <sup>Y Y Y Y</sup> 2 0 0 3 To: <sup>V M</sup> 0 9 <sup>D D</sup> 3 0 <sup>Y Y Y Y</sup> 2 0 0 3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	79060.37	297557.94
(b) Total Contribution Refunds (from Line 20(d)).....	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	78060.37	296557.94
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	31251.31	176433.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	31251.31	176433.29
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>639536.02</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**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 02/2003)

Page 3

Write or Type Committee Name  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Report Covering the Period: From: <sup>M M</sup> 0 7 <sup>D J</sup> 0 1 <sup>Y Y Y</sup> 2 0 0 3 To: <sup>V V</sup> 0 9 <sup>U J</sup> 3 0 <sup>Y Y Y</sup> 2 0 0 3

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	24270.00	
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....	14220.00	
(iii) TOTAL of contributions	38490.00	163981.67
from individuals..... ▶		
(b) Political Party Committees.....	10.37	116.27
(c) Other Political Committees (such as PACS).....	40560.00	133460.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	79060.37	297557.94
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	1017.94	11097.19
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	80078.31	308655.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31251.31	176433.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(b) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS.....	0.00	39650.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) [ > ]	32251.31	216083.29

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	591709.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 15, page3).....	80078.31
25. SUBTOTAL (add Line 23 and Line 24).....	671787.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32251.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	639536.02

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 55	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Jimmy A. Aubry		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address 5845 NC 210 South		Transaction ID: SA11A1.9828
City	State	Zip Code
Bunnlevel	NC	28323
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Scarlett Aubry		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address 5845 NC 210 South		Transaction ID: SA11A1.9827
City	State	Zip Code
Bunnlevel	NC	28323
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Nancy M. Carr		Date of Receipt M / D / Y 09 / 15 / 2003
Mailing Address 150B Von Cannon Circle		Transaction ID: SA11A1.8852
City	State	Zip Code
Sanford	NC	27330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 55	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Buddy Gray Creed		Date of Receipt M / D / Y 08 / 05 / 2003
Mailing Address 202 Eldridge Street		Transaction ID: SA11A1.9683
City	State	Zip Code
Dunn	NC	28334
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer South River EMC	Occupation EVP & CEO	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. James B. Crone		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 743 West Johnson Street Suite B		Transaction ID: SA11A1.9755
City	State	Zip Code
Raleigh	NC	27603
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer 4C Communications	Occupation Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Lucy C. Daniels		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 2836 Tatton Drive		Transaction ID: SA11A1.9815
City	State	Zip Code
Raleigh	NC	27608
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Clinical Psychologist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1900.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 55	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Betty S. Denning</b>		Date of Receipt M / D / Y 07 / 28 / 2003
Mailing Address 2807 Benson Hardee Road		Transaction ID: SA11A1.9847
City Benson	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1060.00	

Full Name (Last, First, Middle Initial) <b>B. Betty S. Denning</b>		Date of Receipt M / D / Y 09 / 12 / 2003
Mailing Address 2807 Benson Hardee Road		Transaction ID: SA11A1.9847
City Benson	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1110.00	

Full Name (Last, First, Middle Initial) <b>C. R. Gene Edmundson</b>		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address P.O. Box 428		Transaction ID: SA11A1.9825
City Oxford	State NC	Zip Code 27565
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Edmundson & Burnette LLP	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>360.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 55	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Jerry R. Ennis		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address P.O. Box 514		Transaction ID: SA11A1.9718
City Lillington	State NC	Zip Code 27546
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Philip A. Fusco		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 1003 Merry Street		Transaction ID: SA11A1.9777
City Dunn	State NC	Zip Code 28324
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer Self-Employed	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Ruth Gleason		Date of Receipt M / D / Y 08 / 24 / 2003
Mailing Address 403 Golfers Lane		Transaction ID: SA11A1.8874
City Nashville	State NC	Zip Code 27858
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Ward Drug Co.	Occupation Bookkeeper	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>610.00</b>
TOTAL This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 55	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Susan B. Goldhaber		Date of Receipt M / D / Y 08 / 27 / 2008
Mailing Address 8013 Wavendon Court		Transaction ID: SA11A1.9811
City Raleigh	State NC	Zip Code 27615
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Scientist/Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Phyllis B. Gould		Date of Receipt M / D / Y 07 / 30 / 2008
Mailing Address P.O. Box 1927		Transaction ID: SA11A1.9857
City Lillington	State NC	Zip Code 27546
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer Gould & Goodrich	Occupation Marketing Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Tommy L. Haddock		Date of Receipt M / D / Y 07 / 08 / 2008
Mailing Address 201 Frostwood Drive		Transaction ID: SA11A1.9842
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Tri-Arc Food Systems Inc.	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>870.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Katherine H. Harper</b>		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address 7317 Baltusrol Lane		Transaction ID: SA11A1.9814
City Charlotte	State NC	Zip Code 28210
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Harper Corp. of America	Occupation Corporate Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Oscar N. Harris</b>		Date of Receipt M / D / Y 08 / 07 / 2003
Mailing Address P.O. Box 578		Transaction ID: SA11A1.9898
City Dunn	State NC	Zip Code 28335
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 240.00
Name of Employer Oscar N. Harris & Assoc.	Occupation CPA	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1240.00	

Full Name (Last, First, Middle Initial) <b>C. Frank Home</b>		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address P.O. Box 338		Transaction ID: SA11A1.9832
City Fair Bluff	State NC	Zip Code 28439
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Frank Home Construction	Occupation Utility Contractor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>2740.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. David S. Jolley</b>		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address 111 Balmoral Fords Colony		Transaction ID: SA11A1.9698
City Williamsburg	State VA	Zip Code 23188
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Wachovia Corporation	Occupation Banker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B. Ann Marie Langford</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 15 Harvey Place		Transaction ID: SA11A1.9899
City Durham	State NC	Zip Code 27705
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Chuk Kung Lee</b>		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 633 Shortspoon Circle		Transaction ID: SA11A1.8717
City Rocky Mount	State NC	Zip Code 27804
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

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

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

FOR LINE NUMBER: PAGE 12 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Victoria Talton Lucas</b>		Date of Receipt M / D / Y 06 / 23 / 2003	
Mailing Address 8095 Buffalo Road		Transaction ID: SA11A1.10045	
City State Zip Code Selma NC 27576	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Amend July 15 Quarterly (Employer/Job) Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) <b>[MEMO ITEM]</b>	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ .00		
Full Name (Last, First, Middle Initial) <b>B. Charmagne Mason</b>		Date of Receipt M / D / Y 09 / 30 / 2003	
Mailing Address 5459 Mittendorf Lane		Transaction ID: SA11A1.0912	
City State Zip Code Alexandria VA 22315	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer The Ferguson Group	Occupation Government Relations		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) <b>C. Marvin D. Marshall</b>		Date of Receipt M / D / Y 09 / 15 / 2003	
Mailing Address 1100 Merry Street		Transaction ID: SA11A1.0850	
City State Zip Code Dunn NC 28334	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 320.00		

SUBTOTAL of Receipts This Page (optional) ..... ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Robert W. Martin</b>		Date of Receipt M / D / Y 08 / 06 / 2003
Mailing Address 811B Pebble Beach Road		Transaction ID: SA11A1.9691
City Sanford	State NC	Zip Code 27332
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Seab Barracuda LLC	Occupation VP & General Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. James W. Mason</b>		Date of Receipt M / D / Y 08 / 05 / 2003
Mailing Address 341 Swains Mill Road		Transaction ID: SA11A1.9671
City Harelsville	State NC	Zip Code 27342
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Mason Farms	Occupation Farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ann B. McCormick</b>		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 900 W. Short Street		Transaction ID: SA11A1.9616
City Lillington	State NC	Zip Code 27548
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Harnett Co. Schools	Occupation Educator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 560.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1550.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Joyce Mc Lamb</b>		Date of Receipt M / D / Y 07 / 25 / 2003	
Mailing Address 3895 US 301 North		Transaction ID: SA11A1.9841	
City State Zip Code Dunn NC 28334	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Carlie C's IGA	Occupation Manager/Co-Owner		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) <b>B. Clement E. Medley, Jr.</b>		Date of Receipt M / D / Y 08 / 27 / 2003	
Mailing Address 102 Winterlochen Drive		Transaction ID: SA11A1.9813	
City State Zip Code Dunn NC 28334	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer First Federal Savings Bank	Occupation President/CEO		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00		
Full Name (Last, First, Middle Initial) <b>C. Bunkey Morgan</b>		Date of Receipt M / D / Y 09 / 15 / 2003	
Mailing Address P.O. Box 728		Transaction ID: SA11A1.9888	
City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Self-Employed	Occupation Owner/Car Wash		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 520.00		

SUBTOTAL of Receipts This Page (optional) ..... ► **1600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 55	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Luther N. Packer		Date of Receipt M / D / Y 08 / 13 / 2008
Mailing Address P.O. Box 190		Transaction ID: SA11A1.9742
City Hope Mills	State NC	Zip Code 28348
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jo A. Perkins		Date of Receipt M / D / Y 08 / 05 / 2008
Mailing Address 816 Raymond Drive		Transaction ID: SA11A1.9676
City Clayton	State NC	Zip Code 27520
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer NC Div. Vocational Rehab.	Occupation Assistant Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1140.00	

Full Name (Last, First, Middle Initial) C. Rhudy F. Phillips		Date of Receipt M / D / Y 07 / 22 / 2008
Mailing Address 1450 Duncan Street		Transaction ID: SA11A1.8619
City Fayetteville	State NC	Zip Code 28303
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Rhudy's Inc.	Occupation Owner/Jeweler	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1120.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 55	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Lannie C. Poole, Jr.		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 401 Ramblewood Drive		Transaction ID: SA11A1.9913
City	State	Zip Code
Raleigh	NC	27609
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mollie W. Prescott		Date of Receipt M / D / Y 07 / 29 / 2003
Mailing Address 200B Aurora Drive		Transaction ID: SA11A1.9953
City	State	Zip Code
Raleigh	NC	27615
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Tom B. Rabon, Jr.		Date of Receipt M / D / Y 08 / 05 / 2003
Mailing Address 511B Salem Ridge Road		Transaction ID: SA11A1.9872
City	State	Zip Code
Holly Springs	NC	27540
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer Red Hat Inc.	Occupation Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>740.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Lakshman Rao</b>		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address 71 Huntington Drive		Transaction ID: SA11A1.9820
City State Zip Code Dunn NC 28334	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Rao & Associates	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Moore Ruffin</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 1707 Jarvis Street		Transaction ID: SA11A1.9880
City State Zip Code Raleigh NC 27608	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Stuart L. Schneider</b>		Date of Receipt M / D / Y 09 / 08 / 2003
Mailing Address P.O. Box 17149		Transaction ID: SA11A1.9819
City State Zip Code Chapel Hill NC 27518	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2000.00
Name of Employer Self-Employed	Occupation Medical Doctor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>2750.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Robert T. Sedivy</b>		Date of Receipt M / D / Y 08 / 20 / 2008
Mailing Address 4804 Durgancroft Place		Transaction ID: SA11A1.9800
City	State	Zip Code
Fuquay-Varina	NC	27526
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer Tomised Corporation	Occupation President & CEO	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>B. M. Durwood Stephenson</b>		Date of Receipt M / D / Y 09 / 26 / 2008
Mailing Address P.O. Box 1187		Transaction ID: SA11A1.9895
City	State	Zip Code
Smithfield	NC	27577
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer Stephenson Contractors	Occupation General Contractor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1120.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Russell D. Underwood</b>		Date of Receipt M / D / Y 08 / 20 / 2008
Mailing Address 2369 Everett Dowdy Road		Transaction ID: SA11A1.9801
City	State	Zip Code
Sanford	NC	27330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>120.00</b>
Name of Employer Charles R. Underwood Inc.	Occupation President/Contractor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1620.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1420.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Linda Gerner Upchurch		Date of Receipt M / D / Y 08 / 13 / 2008
Mailing Address 425 Mamie Upchurch Road		Transaction ID: SA11A1.9752
City Lillington	State NC	Zip Code 27546
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Caul House Associates	Occupation Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kao Zon John Wei		Date of Receipt M / D / Y 08 / 13 / 2008
Mailing Address 103 Turnberry Lane		Transaction ID: SA11A1.9718
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer State of NC	Occupation Software Analyst	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Don G. Welons		Date of Receipt M / D / Y 08 / 15 / 2008
Mailing Address P.O. Box 1254		Transaction ID: SA11A1.8880
City Dunn	State NC	Zip Code 28335
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Don G. Welons Properties Inc.	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

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

FOR LINE NUMBER: PAGE 20 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Lynda L. Wjick</b>		Date of Receipt M / D / Y 07 / 22 / 2003
Mailing Address 18541 Cypress Way		Transaction ID: SA11A1.9690
City Los Gatos	State CA	Zip Code 95030
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Art Gallery Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. LaDane Williamson</b>		Date of Receipt M / D / Y 07 / 28 / 2003
Mailing Address P.O. Box 2588		Transaction ID: SA11A1.9643
City Shallotte	State NC	Zip Code 28459
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Self-Employed	Occupation Real Estate	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. William T. Wilson, Jr.</b>		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 1502 Woodland Avenue		Transaction ID: SA11A1.9754
City Sanford	State NC	Zip Code 27330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 / 55	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Patricia D. Worley</b>		Date of Receipt M / D / Y 08 / 20 / 2003
Mailing Address 1643 Worley Road		Transaction ID: SA11A1.9768
City Princeton	State NC	Zip Code 27569
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer Johnston County Board of Education	Occupation Teacher	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>B. Irene B. Wortman</b>		Date of Receipt M / D / Y 08 / 01 / 2003
Mailing Address 199 Dogwood Lane		Transaction ID: SA11A1.9660
City Lillington	State NC	Zip Code 27546
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 240.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Shobang Zeng</b>		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 112 Kirkfield Drive		Transaction ID: SA11A1.8732
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer NC State University	Occupation Professor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>360.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>24270.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 / 55	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) A. <b>Democratic Congressional Campaign Committee</b>		Date of Receipt M / D / Y <b>07 / 31 / 2008</b>
Mailing Address <b>430 South Capitol Street</b>		Transaction ID: <b>SA11B.9961</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>10.37</b>
Name of Employer	Occupation	In-kind - Telephone/Fax Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(B)-1)
Receipt For: <b>2004</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>116.27</b>	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>10.37</b>
TOTAL This Period (last page this line number only) .....	▶	<b>10.37</b>

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

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

FOR LINE NUMBER: PAGE 23 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Abbott Laboratories Employee PAC</b>		Date of Receipt M / D / Y 09 / 12 / 2003
Mailing Address 139B New York Avenue, NW Suite 200		Transaction ID: SA11C.9926
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Abbott Laboratories Employee PAC</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 139B New York Avenue, NW Suite 200		Transaction ID: SA11C.9943
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Acton Committee for Rural Electrification</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 4301 Wilson Boulevard		Transaction ID: SA11C.9932
City	State	Zip Code
Arlington	VA	22203
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Air Line Pilots Assoc. PAC		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 1625 Massachusetts Ave. NW		Transaction ID: SA11C.9956
City	State	Zip Code
Washington	DC	20036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. American Bankers Association BankPac		Date of Receipt M / D / Y 08 / 27 / 2003
Mailing Address 1120 Connecticut Ave. NW		Transaction ID: SA11C.9923
City	State	Zip Code
Washington	DC	20036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Federation of Teachers GOPE		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 555 New Jersey Avenue N.W.		Transaction ID: SA11C.9955
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3500.00**

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



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

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

FOR LINE NUMBER: PAGE 25 / 55

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. American Hospital Assoc. PAC</b>		Date of Receipt M / D / Y 09 / 24 / 2003	
Mailing Address 325 Seventh Street N.W. Liberty Place Suite 700		Transaction ID: SA11C.9935	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Occupation	Election Cycle-to-Date 1000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date 1000.00		
Full Name (Last, First, Middle Initial) <b>B. American Sugarbeet Growers Association PAC</b>		Date of Receipt M / D / Y 09 / 12 / 2003	
Mailing Address 1156 15th Street NW Suite 1101		Transaction ID: SA11C.9925	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Occupation	Election Cycle-to-Date 500.00		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) <b>C. Assoc. of Trial Lawyers of America PAC</b>		Date of Receipt M / D / Y 09 / 30 / 2003	
Mailing Address The Leonard M. Ring Law Ctr. 1050 31st Street NW		Transaction ID: SA11C.9952	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Occupation	Election Cycle-to-Date 3000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date 3000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. <b>Avaya Inc. PAC</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 1450 G Street NW Suite 4257		Transaction ID: SA11C.9930
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. <b>BAE Systems USA PAC</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 1215 Jefferson Davis Highway Suite 1500		Transaction ID: SA11C.9938
City Arlington	State VA	Zip Code 22202
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. <b>Bank of America Corporation PAC</b>		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 730 15th Street NW		Transaction ID: SA11C.9948
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Blue Cross &amp; Blue Shield of NC Employee PAC</b>		Date of Receipt M / D / Y <b>09 / 24 / 2003</b>
Mailing Address <b>P.O. Box 2291</b>		Transaction ID: <b>SA11C.9929</b>
City	State	Zip Code
<b>Durham</b>	<b>NC</b>	<b>27702</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>4000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Boeing Political Action Committee</b>		Date of Receipt M / D / Y <b>09 / 30 / 2003</b>
Mailing Address <b>1200 Wilson Boulevard</b>		Transaction ID: <b>SA11C.9950</b>
City	State	Zip Code
<b>Arlington</b>	<b>VA</b>	<b>22209</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Committee for Advancement of Cotton</b>		Date of Receipt M / D / Y <b>09 / 30 / 2003</b>
Mailing Address <b>P.O. Box 820292</b>		Transaction ID: <b>SA11C.9949</b>
City	State	Zip Code
<b>Memphis</b>	<b>TN</b>	<b>38182</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CWA-COPE PCC</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 501 Third Street NW Suite 1060		Transaction ID: SA11C.9939
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Dominion Political Action Committee</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address P.O. Box 28866 OJRP 20		Transaction ID: SA11C.9944
City Richmond	State VA	Zip Code 23261
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Federal Express PAC</b>		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 101 Constitution Ave. NW Suite 801 East		Transaction ID: SA11C.9954
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>8000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Florida Sugar Cane League PAC		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 1301 Pennsylvania Ave. NW Suite 401		Transaction ID: SA11C.9934
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. I.B.E.W. - C.O.P.E.		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 1125 15th Street NW		Transaction ID: SA11C.9947
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. International Association of Fire Fighters FIREPAC		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1750 New York Avenue NW		Transaction ID: SA11C.9942
City	State	Zip Code
Washington	DC	20008
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. International Union of Operating Engineers PEC		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 1125 17th Street NW		Transaction ID: SA11C.9928
City	State	Zip Code
Washington	DC	20036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. John Deere PAC		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address One John Deere Place		Transaction ID: SA11C.9957
City	State	Zip Code
Moline	IL	61265
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Johnson & Johnson Employees' Good Government Fund		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 1350 Eye Street N.W. Suite 1210		Transaction ID: SA11C.9959
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Leslie Cox for N.C. House		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address P.O. Box 3001		Transaction ID: SA11C.9918
City Sanford	State NC	Zip Code 27331
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 60.00	

Full Name (Last, First, Middle Initial) B. Lorillard Public Affairs Committee		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address P.O. Box 10529		Transaction ID: SA11C.9921
City Greensboro	State NC	Zip Code 27404
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Merck PAC		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 601 Pennsylvania Ave. NW North Building Suite 1200		Transaction ID: SA11C.9980
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1580.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Minn-Dak Farmers Cooperative PAC</b>		Date of Receipt M / D / Y <b>09 / 26 / 2003</b>
Mailing Address <b>7525 Red River Road</b>		Transaction ID: <b>SA11C.9941</b>
City <b>Wahpeton</b>	State <b>ND</b>	Zip Code <b>58075</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: <b>2004</b> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. NAPUS PAC for Postmasters</b>		Date of Receipt M / D / Y <b>08 / 01 / 2003</b>
Mailing Address <b>8 Herbert Street</b>		Transaction ID: <b>SA11C.9920</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22305</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: <b>2004</b> X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. National Chicken Council PAC</b>		Date of Receipt M / D / Y <b>09 / 26 / 2003</b>
Mailing Address <b>1015 15th Street N.W. Suite 930</b>		Transaction ID: <b>SA11C.9945</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: <b>2004</b> X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 / 55		
	<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)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. North Carolina Association of Educators PAC		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address P.O. Box 2578B		Transaction ID: SA11C.9937
City	State	Zip Code
Raleigh	NC	27611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	See Schedule B, Line 20(c) Refunded Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. North Carolina Farm Bureau FARM PAC		Date of Receipt M / D / Y 07 / 10 / 2003
Mailing Address P.O. Box 27766		Transaction ID: SA11C.9917
City	State	Zip Code
Raleigh	NC	27611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Physical Therapy PAC		Date of Receipt M / D / Y 08 / 13 / 2003
Mailing Address 1111 N. Fairfax Street		Transaction ID: SA11C.9922
City	State	Zip Code
Alexandria	VA	22314
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Progress Energy Employees' Federal PAC		Date of Receipt M / D / Y 07 / 20 / 2003
Mailing Address P.O. Box 1551		Transaction ID: SA11C.9919
City	State	Zip Code
Raleigh	NC	27602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. Progress Energy Employees' Federal PAC		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address P.O. Box 1551		Transaction ID: SA11C.9951
City	State	Zip Code
Raleigh	NC	27602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. RBC Centura Banks Good Government Committee		Date of Receipt M / D / Y 09 / 12 / 2003
Mailing Address P.O. Box 1220		Transaction ID: SA11C.9927
City	State	Zip Code
Rocky Mount	NC	27802
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 / 55	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Realtors PAC</b>		Date of Receipt M / D / Y 09 / 12 / 2003
Mailing Address 700 Eleventh Street N.W.		Transaction ID: SA11C.9924
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Transportation Political Education League</b>		Date of Receipt M / D / Y 09 / 24 / 2003
Mailing Address 14800 Detroit Avenue		Transaction ID: SA11C.9931
City	State	Zip Code
Cleveland	OH	44107
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 9000.00	

Full Name (Last, First, Middle Initial) <b>C. United Space Alliance PAC</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1150 Gemini Avenue		Transaction ID: SA11C.9948
City	State	Zip Code
Houston	TX	77058
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>40560.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 / 55	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
				<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) A. <b>New Century Bank</b>		Date of Receipt M / D / Y <b>09 / 30 / 2008</b>
Mailing Address <b>P.O. Box 1988</b>		Transaction ID: <b>SA15.10048</b>
City	State	Zip Code
<b>Dunn</b>	<b>NC</b>	<b>28335</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1017.94</b>
Name of Employer	Occupation	Interest Earned
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>11097.19</b>	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1017.94</b>
TOTAL This Period (last page this line number only) .....	▶	<b>1017.94</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 37 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Transaction ID: SB17.9972 Date of Disbursement 07 / 21 / 2003	
Mailing Address P.O. Box 914000		Amount of Each Disbursement this Period  67.70  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Orlando	State FL		Zip Code 32891
Purpose of Disbursement Telephone			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Transaction ID: SB17.9998 Date of Disbursement 08 / 24 / 2003	
Mailing Address P.O. Box 914000		Amount of Each Disbursement this Period  62.57  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Orlando	State FL		Zip Code 32891
Purpose of Disbursement Telephone			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Transaction ID: SB17.10020 Date of Disbursement 09 / 13 / 2003	
Mailing Address P.O. Box 914000		Amount of Each Disbursement this Period  58.25  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Orlando	State FL		Zip Code 32891
Purpose of Disbursement Telephone			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>188.52</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)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BellSouth</b>		Transaction ID: SB17.9973 Date of Disbursement 07 / 21 / 2003	
Mailing Address P.O. Box 33009			
City Charlotte	State NC	Zip Code 28243	Amount of Each Disbursement this Period  82.95  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Telephone		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. BellSouth</b>		Transaction ID: SB17.9997 Date of Disbursement 08 / 24 / 2003	
Mailing Address P.O. Box 33009			
City Charlotte	State NC	Zip Code 28243	Amount of Each Disbursement this Period  76.48  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Telephone		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. Campaign Resources Inc.</b>		Transaction ID: SB17.9997 Date of Disbursement 07 / 15 / 2003	
Mailing Address 303 W. Jones Street Suite 220			
City Raleigh	State NC	Zip Code 27603	Amount of Each Disbursement this Period  2500.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement PAC Consulting		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2659.43</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 39 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Campaign Resources Inc.		Transaction ID: SB17.9988 Date of Disbursement 07 / 15 / 2003	
Mailing Address 303 W. Jones Street Suite 22D			
City Raleigh	State NC	Zip Code 27603	Amount of Each Disbursement this Period  2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement In-District Fundraising		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resources Inc.		Transaction ID: SB17.9989 Date of Disbursement 07 / 15 / 2003	
Mailing Address 303 W. Jones Street Suite 22D			
City Raleigh	State NC	Zip Code 27603	Amount of Each Disbursement this Period  500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Administrative Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Clarence Lightner Leadership Fund		Transaction ID: SB17.9976 Date of Disbursement 07 / 28 / 2003	
Mailing Address P.O. Box 27482			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional) .....	▶	2750.00
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Transaction ID: SB17.10041 Date of Disbursement 07 / 31 / 2003	
Mailing Address 430 South Capitol Street		Amount of Each Disbursement this Period  10.37  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Washington	State DC		Zip Code 20003
Purpose of Disbursement In-kind - Telephone/Fax			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. Dunn Daily Record</b>		Transaction ID: SB17.10031 Date of Disbursement 09 / 29 / 2003	
Mailing Address P.O. Box 1448		Amount of Each Disbursement this Period  225.75  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Dunn	State NC		Zip Code 28335
Purpose of Disbursement Ad Expense			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. DWD Software Development Corp.</b>		Transaction ID: SB17.9984 Date of Disbursement 07 / 10 / 2003	
Mailing Address P.O. Box 28629		Amount of Each Disbursement this Period  1646.96  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Raleigh	State NC		Zip Code 27611
Purpose of Disbursement Acct. Mgmt. Services			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>▶</b>	<b>1883.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>▶</b>	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 41 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. DWD Software Development Corp.		Transaction ID: SB17.9865 Date of Disbursement 07 / 10 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  519.23  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Computer Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DWD Software Development Corp.		Transaction ID: SB17.9879 Date of Disbursement 08 / 08 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  414.05  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Acct. Mgmt. Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DWD Software Development Corp.		Transaction ID: SB17.9980 Date of Disbursement 08 / 08 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  551.70  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Computer Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>1478.96</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 42 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. DWD Software Development Corp.		Transaction ID: SB17.10026 Date of Disbursement 09 / 22 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  611.77  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Acct. Mgmt. Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DWD Software Development Corp.		Transaction ID: SB17.10027 Date of Disbursement 09 / 22 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  248.02  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Computer Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DWD Software Development Corp.		Transaction ID: SB17.10028 Date of Disbursement 09 / 22 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  113.48  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Mailing Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	973.28
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 43 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. DWD Software Development Corp.		Transaction ID: SB17.10029 Date of Disbursement 09 / 22 / 2003	
Mailing Address P.O. Box 28629			
City Raleigh	State NC	Zip Code 27611	Amount of Each Disbursement this Period  728.75  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Direct Mail Expense		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ENPC		Transaction ID: SB17.10034 Date of Disbursement 09 / 13 / 2003	
Mailing Address P.O. Box 4633			
City Rocky Mount	State NC	Zip Code 27803	Amount of Each Disbursement this Period  300.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Event Tickets/Ad		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bob Etheridge		Transaction ID: SB17.10008 Date of Disbursement 09 / 11 / 2003	
Mailing Address 1106 Summerville-Mamers			
City Lillington	State NC	Zip Code 27548	Amount of Each Disbursement this Period  185.88  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Travel Exp.Reimb.		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>1214.44</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Bob Etheridge</b>		Transaction ID: SB17.10009 Date of Disbursement 09 / 11 / 2003		
Mailing Address 1108 Summerville-Mamers		Amount of Each Disbursement this Period  97.12  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Gift Exp.Reimb.				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) <b>B. Howard's Barbecue</b>		Transaction ID: SB17.9985 Date of Disbursement 08 / 12 / 2003		
Mailing Address P.O. Box 844 100 S. Main Street		Amount of Each Disbursement this Period  1443.75  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Catering Expense				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) <b>C. Howard's Barbecue</b>		Transaction ID: SB17.10030 Date of Disbursement 09 / 23 / 2003		
Mailing Address P.O. Box 844 100 S. Main Street		Amount of Each Disbursement this Period  862.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Catering Expense				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2402.87</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)

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17 20a     18 20b     19a 20c     19b 21

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. La Brasserie</b>		Transaction ID: SB17.10024 Date of Disbursement 09 / 16 / 2003		
Mailing Address    239 Massachusetts Avenue		Amount of Each Disbursement this Period  542.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Washington	State DC			Zip Code 20002
Purpose of Disbursement Catering Expense				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	State:    District		

Full Name (Last, First, Middle Initial) <b>B. Lasting Printing &amp; Graphics</b>		Transaction ID: SB17.9974 Date of Disbursement 07 / 25 / 2003		
Mailing Address    733 W. Johnson Street Lower Level		Amount of Each Disbursement this Period  1530.10 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27603
Purpose of Disbursement Printing				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	State:    District		

Full Name (Last, First, Middle Initial) <b>C. Lasting Printing &amp; Graphics</b>		Transaction ID: SB17.9999 Date of Disbursement 08 / 24 / 2003		
Mailing Address    733 W. Johnson Street Lower Level		Amount of Each Disbursement this Period  592.78 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27603
Purpose of Disbursement Printing				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	State:    District		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2664.88</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)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Lasting Printing &amp; Graphics</b>		Transaction ID: SB17.1001B Date of Disbursement 09 / 13 / 2003		
Mailing Address 733 W. Johnson Street Lower Level		Amount of Each Disbursement this Period  797.15  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27603
Purpose of Disbursement Printing				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) <b>B. Lee County Democratic Party</b>		Transaction ID: SB17.10005 Date of Disbursement 08 / 24 / 2003		
Mailing Address P.O. Box 5011		Amount of Each Disbursement this Period  250.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Sanford	State NC			Zip Code 27330
Purpose of Disbursement Event Tickets				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) <b>C. Mike Davis Public Relations</b>		Transaction ID: SB17.9978 Date of Disbursement 08 / 04 / 2003		
Mailing Address 303 West Jones Street Suite 210		Amount of Each Disbursement this Period  4000.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27603
Purpose of Disbursement General Campaign Consulting				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5047.15</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 47 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
 BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mike Davis Public Relations		Transaction ID: SB17.9996 Date of Disbursement 08 / 24 / 2003		
Mailing Address 903 West Jones Street Suite 21D		Amount of Each Disbursement this Period  2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27603
Purpose of Disbursement General Campaign Consulting				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) B. NAACP Wendell-Wake		Transaction ID: SB17.10019 Date of Disbursement 09 / 13 / 2003		
Mailing Address P.O. Box 648		Amount of Each Disbursement this Period  240.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Wendell	State NC			Zip Code 27501
Purpose of Disbursement Event Tickets				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) C. Praigg & Praigg		Transaction ID: SB17.10017 Date of Disbursement 09 / 13 / 2003		
Mailing Address 3622 Lyckan Parkway Suite 5008		Amount of Each Disbursement this Period  25.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Durham	State NC			Zip Code 27707
Purpose of Disbursement Tax Services				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼			
State: District				

SUBTOTAL of Disbursements This Page (optional) .....	▶	2265.00
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 48 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Debbie Privette		Transaction ID: SB17.9863 Date of Disbursement 07 / 03 / 2003	
Mailing Address P.O. Box 1245			
City Zebulon	State NC	Zip Code 27597	Amount of Each Disbursement this Period  304.84  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Mileage Reimbursement		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Debbie Privette		Transaction ID: SB17.9870 Date of Disbursement 07 / 18 / 2003	
Mailing Address P.O. Box 1245			
City Zebulon	State NC	Zip Code 27597	Amount of Each Disbursement this Period  500.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Consulting/Voter Contact		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RBC Centura Bank		Transaction ID: SB17.10035 Date of Disbursement 07 / 07 / 2003	
Mailing Address 1100 West Broad Street			
City Dunn	State NC	Zip Code 28335	Amount of Each Disbursement this Period  70.95  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>875.79</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. RBC Centura Bank		Transaction ID: SB17.10036 Date of Disbursement 08 / 04 / 2003	
Mailing Address 1100 West Broad Street		Amount of Each Disbursement this Period 78.68	
City Dunn	State NC	Zip Code 28335	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. RBC Centura Bank		Transaction ID: SB17.10037 Date of Disbursement 08 / 05 / 2003	
Mailing Address 1100 West Broad Street		Amount of Each Disbursement this Period 22.75	
City Dunn	State NC	Zip Code 28335	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Printed Item Charge		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. RBC Centura Bank		Transaction ID: SB17.10038 Date of Disbursement 08 / 04 / 2003	
Mailing Address 1100 West Broad Street		Amount of Each Disbursement this Period 32.25	
City Dunn	State NC	Zip Code 28335	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>133.68</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Special Events Rentals</b>		Transaction ID: SB17.10001 Date of Disbursement 08 / 24 / 2003	
Mailing Address 5450 Old Wake Forest Rd. Suite 101		Amount of Each Disbursement this Period 1250.83	
City Raleigh	State NC	Zip Code 27609	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Tent & Furniture Rental		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. The Carolinian</b>		Transaction ID: SB17.10040 Date of Disbursement 08 / 29 / 2003	
Mailing Address P.O. Box 25308		Amount of Each Disbursement this Period 390.00	
City Raleigh	State NC	Zip Code 27611	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Ad Expense		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. U.S. Postmaster</b>		Transaction ID: SB17.9996 Date of Disbursement 07 / 15 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 1295.00	
City Raleigh	State NC	Zip Code 27611	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2935.83</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)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: SB17.9971 Date of Disbursement 07 / 18 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 190.85	
City Raleigh	State NC	Zip Code 27611	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: SB17.9994 Date of Disbursement 08 / 21 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 518.00	
City Raleigh	State NC	Zip Code 27611	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: SB17.9995 Date of Disbursement 08 / 21 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 333.00	
City Raleigh	State NC	Zip Code 27611	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>1041.85</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 52 / 55
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: SB17.10006 Date of Disbursement 08 / 25 / 2003		
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period  69.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27611
Purpose of Disbursement Postage				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: SB17.10032 Date of Disbursement 08 / 24 / 2003		
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period  222.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Raleigh	State NC			Zip Code 27611
Purpose of Disbursement Postage				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) C. Richard B. Wallace		Transaction ID: SB17.10003 Date of Disbursement 08 / 24 / 2003		
Mailing Address B5 Oak Street		Amount of Each Disbursement this Period  433.27  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27548
Purpose of Disbursement Travel Exp.Reimb.				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼			
State: District				

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>718.27</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Richard B. Wallace		Transaction ID: SB17.10004 Date of Disbursement 08 / 24 / 2003		
Mailing Address 85 Oak Street		Amount of Each Disbursement this Period  93.68  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Telephone Exp.Reimb.				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) B. Richard B. Wallace		Transaction ID: SB17.10021 Date of Disbursement 09 / 15 / 2003		
Mailing Address 85 Oak Street		Amount of Each Disbursement this Period  425.80  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Travel Exp.Reimb.				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) C. Richard B. Wallace		Transaction ID: SB17.10022 Date of Disbursement 09 / 15 / 2003		
Mailing Address 85 Oak Street		Amount of Each Disbursement this Period  46.91  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Lillington	State NC			Zip Code 27546
Purpose of Disbursement Telephone Exp.Reimb.				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District		

SUBTOTAL of Disbursements This Page (optional) .....	▶	566.39
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		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)  
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Young Democrats of NC		Transaction ID: SB17.9977 Date of Disbursement 07 / 28 / 2003	
Mailing Address 220 Hillsborough Street		Amount of Each Disbursement this Period 250.00	
City Raleigh	State NC	Zip Code 27603	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Event Tickets/Sponsorship		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Zebulon Printing		Transaction ID: SB17.9991 Date of Disbursement 08 / 13 / 2003	
Mailing Address 120 E. Gannon Avenue		Amount of Each Disbursement this Period 209.72	
City Zebulon	State NC	Zip Code 27507	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Printing		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	459.72
TOTAL This Period (last page this line number only) .....	▶	30259.16

**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)

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

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NAME OF COMMITTEE (In Full)  
 BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)  
 A. North Carolina Association of Educators PAC

Transaction ID: SB20C.10D49  
 Date of Disbursement

Mailing Address P.O. Box 25788

09 / 30 / 2003

City Raleigh State NC Zip Code 27611

Amount of Each Disbursement this Period

Purpose of Disbursement  
 Contribution Refund

1000.00  
 Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Candidate Name

Category/  
 Type

Office Sought: House Senate President  
 State: District  
 Disbursement For: 2004  
 Primary General  
 Other (specify) ▼

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