

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 COAKLEY FOR CONGRESS ELECTION COMMITTEE

ADDRESS (number and street) PO BOX 480279 CHARLOTTE NC 28269 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00558106 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT NC 12

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 2014

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 Thomas Datwyler

Signature of Treasurer Thomas Datwyler [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

COAKLEY FOR CONGRESS ELECTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	172389.87	290824.52
(b) Total Contribution Refunds (from Line 20(d))	65.00	65.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	172324.87	290759.52
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	107221.98	185751.66
(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)).....	107221.98	185751.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	105138.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	51135.00	116085.00
(ii) Unitemized	115754.87	143739.52
(iii) TOTAL of contributions from individuals	166889.87	259824.52
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	31000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	172389.87	290824.52
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	131.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....		
	172389.87	290955.52

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	107221.98	185751.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	65.00	65.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	65.00	65.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	107286.98	185816.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	40035.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	172389.87
25. SUBTOTAL (add Line 23 and Line 24).....	212425.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	107286.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	105138.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Van Archer

Mailing Address 218 W Lynwood Ave

City San Antonio State TX Zip Code 78212

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

Name of Employer Self Occupation Ranching

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.10815

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Jim Bailey

Mailing Address 5206 TANNERON PI

City Charlotte State NC Zip Code 28226

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

Name of Employer WELLS FARGO ADVISORS Occupation FINANCIAL ADVISORS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Leslie Baker

Mailing Address 600 S Main St

City Winston Salem State NC Zip Code 27101

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.9744

Amount of Each Receipt this Period
500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Matt Barr		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2014
Mailing Address 19 PINE TREE Rd		Transaction ID : SA11AI.6123
City Salisbury	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CAROLINA COLOR CORP	Occupation MANUFACTURING	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Steven Bell		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2014
Mailing Address 9 Granville Oaks Ct		Transaction ID : SA11AI.7510
City Greensboro	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bell Partners INC.	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. David Benham		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2014
Mailing Address 6130 FERNCLIFF Dr		Transaction ID : SA11AI.6058
City Concord	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BENHAM COMPANIES	Occupation OWNER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jesse Bennett

Mailing Address 3916 Stoney Ridge Trl

City State Zip Code
Charlotte NC 28210

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

Name of Employer Occupation
Aqua Sol Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.9417

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
William Berry

Mailing Address 19012 Brigadoon Pl

City State Zip Code
Cornelius NC 28031

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

Name of Employer Occupation
American Tire Distributors, Inc CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : SA11AI.6176

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Barbara Berryhill

Mailing Address 7328 Sardis Rd

City State Zip Code
Charlotte NC 28270

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

Name of Employer Occupation
Realtor Berryhill Realty Co

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : SA11AI.5985

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard Bigger

Mailing Address 3901 Silver Bell Dr

City State Zip Code
Charlotte NC 28211

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.9425

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
William Buckthal

Mailing Address 900 S Lincoln St

City State Zip Code
Amarillo TX 79101

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

Name of Employer Occupation
Self Petroleum Geologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.8251

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
James Bullock

Mailing Address 521 Banner Ave

City State Zip Code
Greensboro NC 27401

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

Name of Employer Occupation
Environmental Air President/Ceo

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.6317

Amount of Each Receipt this Period
250.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 9 OF 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Grant Campbell

Mailing Address 9910 Hillspring Dr

City State Zip Code
Huntersville NC 28078

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

Name of Employer Occupation
Carolinas Physician Network Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 09 / 2014

Transaction ID : SA11AI.5972

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Anna Carpenter

Mailing Address 12494 N Royal Ln

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.9950

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Marcia Chazen

Mailing Address PO Box 1229

City State Zip Code
Bellaire TX 77402-1229

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

Name of Employer Occupation
Information Requested Informaiton Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.11569

Amount of Each Receipt this Period
2600.00

Reattribute: To Wife

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Stephen Chazen

Mailing Address PO BOX 1229

City: Bellaire State: TX Zip Code: 77402-1229

FEC ID number of contributing federal political committee: C

Name of Employer: OCCIDENTAL PETROLEUM Occupation: CORPORATE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 08 / 28 / 2014

Transaction ID : SA11AI.6117

Amount of Each Receipt this Period: 5200.00

B. Full Name (Last, First, Middle Initial)
Stephen Chazen

Mailing Address PO BOX 1229

City: Bellaire State: TX Zip Code: 77402-1229

FEC ID number of contributing federal political committee: C

Name of Employer: OCCIDENTAL PETROLEUM Occupation: CORPORATE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 08 / 28 / 2014

Transaction ID : SA11AI.11568

Amount of Each Receipt this Period: -2600.00

Reattribute: To Wife

C. Full Name (Last, First, Middle Initial)
Elloine Clark

Mailing Address 3716 Maplewood Ave

City: Dallas State: TX Zip Code: 75205

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 07 / 13 / 2014

Transaction ID : SA11AI.11573

Amount of Each Receipt this Period: 2600.00

Reattribute: To Wife

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Judy Clark		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 19781 Grand View Dr		Transaction ID : SA11AI.9381	
City Topanga	State CA	Zip Code 90290	Amount of Each Receipt this Period _____ _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. William Clark		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2014	
Mailing Address 3716 Maplewood Ave		Transaction ID : SA11AI.5817	
City Dallas	State TX	Zip Code 75205	Amount of Each Receipt this Period _____ _____ 5200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5200.00		

Full Name (Last, First, Middle Initial) C. William Clark		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2014	
Mailing Address 3716 Maplewood Ave		Transaction ID : SA11AI.11572	
City Dallas	State TX	Zip Code 75205	Amount of Each Receipt this Period _____ _____ -2600.00 Reattribute: To Wife
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

SUBTOTAL of Receipts This Page (optional).....	_____ _____ 2850.00
TOTAL This Period (last page this line number only).....	_____ _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 3455 Meridian Way

City State Zip Code
Winston Salem NC 27104

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.9748

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Harold Crockett

Mailing Address 6677 Fox Ridge Cir

City State Zip Code
Davidson NC 28036

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.11149

Amount of Each Receipt this Period
300.00

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

Mailing Address 5409 Eastern Shores Dr

City State Zip Code
Greensboro NC 27455

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.6193

Amount of Each Receipt this Period
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ray Edwards

Mailing Address 4137 Coachmans Ct

City High Point State NC Zip Code 27262

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.10465

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ernest Ellison

Mailing Address 6720 Churchill Park Ct

City Charlotte State NC Zip Code 28210

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ernest Ellison

Mailing Address 6720 Churchill Park Ct

City Charlotte State NC Zip Code 28210

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3400.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.7367

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) Ernest Ellison		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014	
Mailing Address 6720 Churchill Park Ct		Transaction ID : SA11AI.9445	
City Charlotte	State NC	Zip Code 28210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) Ernest Ellison		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2014	
Mailing Address 6720 Churchill Park Ct		Transaction ID : SA11AI.9969	
City Charlotte	State NC	Zip Code 28210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00		

Full Name (Last, First, Middle Initial) Ernest Ellison		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 23 / 2014	
Mailing Address 6720 Churchill Park Ct		Transaction ID : SA11AI.10821	
City Charlotte	State NC	Zip Code 28210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00		

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Carole Enslen

Mailing Address 110 Overlook Dr

City State Zip Code
Flat Rock NC 28731

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.9966

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Pfn Fanning

Mailing Address PO Box 607

City State Zip Code
Unionville PA 19375

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.9771

Amount of Each Receipt this Period
100.00

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

Mailing Address 108 BUCKINGHAM PI

City State Zip Code
Salisbury NC 28147

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

Name of Employer Occupation
SELF DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : SA11AI.6089

Amount of Each Receipt this Period
500.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Lynn Fortson		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2014
Mailing Address 1615 BRINGLE FERRY Rd		Transaction ID : SA11AI.6002
City Salisbury	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Robert Fraser Iii		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2014
Mailing Address 3801 POMFRET Ln		Transaction ID : SA11AI.5981
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer SOUTHEAST RADIATION ONCOLOGY	Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) C. Ted Frey		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2014
Mailing Address PO Box 889004		Transaction ID : SA11AI.10250
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Self Employed	Occupation Small Stock Investor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Alonzo Gates

Mailing Address 785 Burr Rd

City San Antonio State TX Zip Code 78209

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

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.7069

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Amy Godley

Mailing Address 5300 Green Rea Rd

City Charlotte State NC Zip Code 28226

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.8825

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Melvin Graham

Mailing Address 2701 Coltsgate Rd

City Charlotte State NC Zip Code 28211

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

Name of Employer Graham Enterprises of Charlotte LLC Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5841

Amount of Each Receipt this Period
 2600.00

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Richard Griffith		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 3417 Milam St		Transaction ID : SA11AI.10247	
City Houston	State TX	Zip Code 77002	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self	Occupation Invester		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. Richard Griffith		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 3417 Milam St		Transaction ID : SA11AI.10448	
City Houston	State TX	Zip Code 77002	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self	Occupation Invester		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. James Hall		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 1114 Belgrave Place		Transaction ID : SA11AI.5943	
City Charlotte	State NC	Zip Code 28203	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer CMC	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1750.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) Richard Handford		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2316 Westfield Rd		Transaction ID : SA11AI.5904
City Charlotte	State NC	Zip Code 28207
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer MYERS AND CHAPMAN, INC	Occupation PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) John Hanford		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 2832 SAINT ANDREWS Ln		Transaction ID : SA11AI.6013
City Charlotte	State NC	Zip Code 28205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Bobby Harris		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 135 Windsor Dr		Transaction ID : SA11AI.9422
City Calhoun	State GA	Zip Code 30701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joan Hearn

Mailing Address 5938 Union Pacific Ave

City State Zip Code
Charlotte NC 28210

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

Name of Employer Occupation
Self Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.6204

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Bill Holden

Mailing Address 4467 Plantation Dr

City State Zip Code
Fair Oaks CA 95628

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.9951

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
William Hotaling

Mailing Address 125 Quassaick Ave

City State Zip Code
New Windsor NY 12553

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : SA11AI.5992

Amount of Each Receipt this Period
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Marc Iverson

Mailing Address 5200 Bevington Pl

City State Zip Code
Charlotte NC 28277-5504

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2014

Transaction ID : SA11AI.6231

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lloyd Kenneth

Mailing Address 494 V O A Site C Rd

City State Zip Code
Greenville NC 27834

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.11147

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Tammy Langdon

Mailing Address 4125 Moorland Dr

City State Zip Code
Charlotte NC 28226

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

Name of Employer Occupation
Staffmasters Inc. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.10818

Amount of Each Receipt this Period
150.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) Jo Lee		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 154 Gibson Ln		Transaction ID : SA11AI.6520
City Dunn	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Lee Pest Solutions	Occupation Part Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Jo Lee		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 154 Gibson Ln		Transaction ID : SA11AI.10589
City Dunn	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Lee Pest Solutions	Occupation Part Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) Bill Lehev		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 9900 Lampkin Park Dr		Transaction ID : SA11AI.5909
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hines Securities	Occupation Managing Director	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 402 Creedmoor Rd

City Jacksonville State NC Zip Code 28546

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.6522

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Laurie Mackey

Mailing Address 4396 Windlake Dr

City Niceville State FL Zip Code 32578

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.10262

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
James Martin

Mailing Address 458 Beaten Path Rd

City Mooresville State NC Zip Code 28117

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.9949

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Diane McMahon

Mailing Address 14111 Sarah Ann Stephens Dr

City State Zip Code
Huntersville NC 28078

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.6203

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Joyce Mercer

Mailing Address 4500 Carmel Estates Rd

City State Zip Code
Charlotte NC 28226

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5856

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Herts Messik

Mailing Address 14 Ballo Pl

City State Zip Code
Edison NJ 08820

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.11368

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 25 OF 108
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Morris Moore

Mailing Address 3741 Kaismore Ct

City Winston Salem State NC Zip Code 27106

FEC ID number of contributing federal political committee. C

Name of Employer Reynolds American Occupation Finance Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.9752

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Fred Morganthall

Mailing Address 7625 STONECROFT PARK DR

City Charlotte State NC Zip Code 28226

FEC ID number of contributing federal political committee. C

Name of Employer HARRIS TEETER Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.5877

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Joe Neely

Mailing Address 2705 Bartram PI

City Winston Salem State NC Zip Code 27106

FEC ID number of contributing federal political committee. C

Name of Employer Retried Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.9419

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ronald Payne		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 2146 Sharon Ln		Transaction ID : SA11AI.8253
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) B. Ronald Payne		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 2146 Sharon Ln		Transaction ID : SA11AI.10248
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) C. Ronald Payne		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 2146 Sharon Ln		Transaction ID : SA11AI.11150
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
George Pfaff

Mailing Address 16 Salisbury Dr Apt 7118

City Asheville State NC Zip Code 28803

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.10245

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Tom Phillips

Mailing Address 7996 Holly Ct

City Denver State NC Zip Code 28037

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.10814

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
James Potts

Mailing Address 143 LONG Cv

City New London State NC Zip Code 28127

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

Name of Employer OVERHEAD DOOR CO. OF CHARLOTTE Occupation C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.5881

Amount of Each Receipt this Period
250.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 28 OF 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 301 W Beauregard Ave

City State Zip Code
San Angelo TX 76903

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8884

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jay Rabe

Mailing Address PO Box 848

City State Zip Code
Albemarle NC 28002

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

Name of Employer Occupation Information Requested
GTR LLC. Mgr.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.9423

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Jeff Reasons

Mailing Address 10208 New Town Rd

City State Zip Code
Waxhaw NC 28173

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

Name of Employer Occupation Information Requested
Southern Health Partners, Inc Business executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6240

Amount of Each Receipt this Period
100.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Liz Resnik

Mailing Address 635 S Park Centre Ave Apt 1321

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.8479

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jerome Richardson

Mailing Address 800 S Mint St

City Charlotte	State NC	Zip Code 28202
-------------------	-------------	-------------------

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

Name of Employer Carolina Panthers	Occupation Owner
---------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : SA11AI.5809

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Monte Richardson

Mailing Address 29 Highbridge Xing Apt 3301

City Asheville	State NC	Zip Code 28803
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.9420

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Stanley Rosenberg

Mailing Address 2 Staunton Ct

City Greensboro State NC Zip Code 27410-6062

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.6137

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
George Rountree

Mailing Address 1960 Hillsboro Rd

City Wilmington State NC Zip Code 28403

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.9746

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Lawrence Russell

Mailing Address 4275 Owens Rd Apt 531

City Evans State GA Zip Code 30809

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.7968

Amount of Each Receipt this Period
 250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Glenn Sherrill		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address PO Box 19653		Transaction ID : SA11AI.7508	
City Charlotte	State NC	Zip Code 28219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Steelfab Inc	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Ronald G Sherrill		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address PO Box 19083		Transaction ID : SA11AI.5870	
City Charlotte	State NC	Zip Code 28219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SteelFab, Inc	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Johnny Lee Sides		Date of Receipt M M / D D / Y Y Y Y 07 / 16 / 2014	
Mailing Address P O Box 1969		Transaction ID : SA11AI.5823	
City Welcome	State NC	Zip Code 27374	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Lee Siegel		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 2230 W Riverside Ave Apt 101		Transaction ID : SA11AI.7466	
City Spokane	State WA	Zip Code 99201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Lee Siegel		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 2230 W Riverside Ave Apt 101		Transaction ID : SA11AI.8477	
City Spokane	State WA	Zip Code 99201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Lee Siegel		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 2230 W Riverside Ave Apt 101		Transaction ID : SA11AI.10811	
City Spokane	State WA	Zip Code 99201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Carol Smith

Mailing Address 2114 Bradley Pond Rd

City Ellenburg Center	State NY	Zip Code 12934
--------------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.9952

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Charles Smith

Mailing Address PO Box 1586

City Cary	State NC	Zip Code 27512
--------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.7506

Amount of Each Receipt this Period
500.00

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

Mailing Address 355 CHANDLER Rd

City Salisbury	State NC	Zip Code 28147
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.6000

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Spears		Date of Receipt MM / DD / YYYY 09 / 23 / 2014
Mailing Address 229 N Church St Unit 300		Transaction ID : SA11AI.10813
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Riverside Mill. Inc.	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Harry Spence		Date of Receipt MM / DD / YYYY 08 / 20 / 2014
Mailing Address 13048 Somerset Dr		Transaction ID : SA11AI.7966
City Grass Valley	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Beverly Sporer		Date of Receipt MM / DD / YYYY 08 / 18 / 2014
Mailing Address 733 Plantation Estates Dr Apt C10		Transaction ID : SA11AI.7673
City Matthews	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Roger Stetson

Mailing Address 9225 Cascade Ave Apt 2204

City West Des Moines State IA Zip Code 50266

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.10611

Amount of Each Receipt this Period
100.00

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

Mailing Address 31 Owenoke Way

City Riverside State CT Zip Code 06878

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.11300

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
John Stout

Mailing Address 31 Owenoke Way

City Riverside State CT Zip Code 06878

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

Name of Employer BHR Capital LLC Occupation Investment Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : SA11AI.11298

Amount of Each Receipt this Period
2600.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ann Tarwater		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1414 Billmore Dr		Transaction ID : SA11AI.6141
City Charlotte	State NC	
Zip Code 28207		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. Hillman Tatnall		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 332		Transaction ID : SA11AI.11252
City Chilmark	State MA	
Zip Code 02535		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. John Valerius		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1909 Canterbury Street		Transaction ID : SA11AI.6189
City Irving	State TX	
Zip Code 75062		Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Victor Van Damme

Mailing Address 5113 Patricia Ave

City Las Vegas State NV Zip Code 89130

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11AI.5961

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
William Vandiver

Mailing Address 2050 stonebridge Ln

City charlotte State NC Zip Code 28211

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.5753

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Raymond Von Drehle Jr.

Mailing Address 612 3RD Ave NE

City Hickory State NC Zip Code 28601

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

Name of Employer VON DREHLE CORPORATION Occupation CHAIRMAN OF BOARD OF DIR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : SA11AI.5988

Amount of Each Receipt this Period
250.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 38 OF 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kenneth Waldo

Mailing Address 1000 Deerfield Rd

City Raleigh State NC Zip Code 27609

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.10616

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Kenneth Waldo

Mailing Address 1000 Deerfield Rd

City Raleigh State NC Zip Code 27609

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.10832

Amount of Each Receipt this Period
100.00

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

Mailing Address 4685 Elk Valley Ct

City Winston Salem State NC Zip Code 27103

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

Name of Employer All Foot Care, PA Occupation Nursing Home Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : SA11AI.5805

Amount of Each Receipt this Period
250.00

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

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

410.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) Howard Woltz		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 1373 Boggs Dr		Transaction ID : SA11AI.9750
City Mount Airy	State NC	
Zip Code 27030		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00
Name of Employer Insteel Industries Inc.	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Dana Woody		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 2201 Cortelyou Rd		Transaction ID : SA11AI.10817
City Charlotte	State NC	
Zip Code 28211		Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Elo Zinke		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 2582 County Road 1596		Transaction ID : SA11AI.9124
City Avinger	State TX	
Zip Code 75630		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 40 OF 108
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

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

Mailing Address 120 NEWBY Ct

City Rocky Mount State NC Zip Code 27804

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

51135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) ACTON PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2014
Mailing Address PO BOX 442		Transaction ID : SA11C.5736
City SHARPSBURG	State GA	Zip Code 30277
FEC ID number of contributing federal political committee. C C00411579	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Andy Dulin Committee		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address PO Box 6221		Transaction ID : SA11C.5743
City Charlotte	State NC	Zip Code 28207
FEC ID number of contributing federal political committee. C C00514380	Amount of Each Receipt this Period 150.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00	

Full Name (Last, First, Middle Initial) Committee to Elect Carl Ford		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 320 KETCHIE ESTATES RD		Transaction ID : SA11C.5739
City China Grove	State NC	Zip Code 28023
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) Committee to Elect Rayne Brown		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 416 Lee Ave		Transaction ID : SA11C.5738	
City Lexington	State NC	Amount of Each Receipt this Period 250.00	
Zip Code 27295			
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 550.00	

Full Name (Last, First, Middle Initial) Davidson County Republican Party		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 335 Cunningham Brick Yard Road		Transaction ID : SA11C.5742	
City Lexington	State NC	Amount of Each Receipt this Period 500.00	
Zip Code 27292			
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) EAGLE FORUM PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address P.O. BOX 618		Transaction ID : SA11C.5748	
City ALTON	State IL	Amount of Each Receipt this Period 1500.00	
Zip Code 62002			
FEC ID number of contributing federal political committee. C C00103937			
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 108
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Harry Warren For North Carolina

Mailing Address 201 KINGSBRIDGE Rd

City Salisbury State NC Zip Code 28144

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.11575

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.

Mailing Address 430 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11C.5746

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. 310 Sign Company		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 804 Clanton Rd		Amount of Each Disbursement this Period 214.50 Transaction ID : SB17.11435
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Banner	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Advantage Direct		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 2300 Clarendon Boulevard Ste. 303		Amount of Each Disbursement this Period 1798.45 Transaction ID : SB17.11468
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement IVR Calls	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 8625 Arbor Creek Drive		Amount of Each Disbursement this Period 29.95 Transaction ID : SB17.11437
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Bank Fees	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	2042.90
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 45 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 8625 Arbor Creek Drive		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.11520
City Charlotte	State NC	
Purpose of Disbursement Bank Fees	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. BJ Wholesale		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 7905 Lyles Ln		Amount of Each Disbursement this Period 131.95 Transaction ID : SB17.11473
City Concord	State NC	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Darlene Blount		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 212 Ferncliff Dr		Amount of Each Disbursement this Period 136.35 Transaction ID : SB17.11418
City Salisbury	State NC	
Purpose of Disbursement Expense Reimbursement	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	303.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Swicegood Paper		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1305 East Innes Street		Amount of Each Disbursement this Period 50.50
City Salisbury	State NC	
Zip Code 28145	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11418.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 850 Jake Alexander Blvd		Amount of Each Disbursement this Period 85.85
City Salsbury	State NC	
Zip Code 28145	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11418.1
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Capital Promotions Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 249 N. Keswick Ave.		Amount of Each Disbursement this Period 273.00
City Glenside	State PA	
Zip Code 19038	Purpose of Disbursement Stickers	Transaction ID : SB17.11459
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	273.00
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 47 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Care of Advantage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 2300 Clarendon Boulevard Ste. 303		Amount of Each Disbursement this Period 775.25 Transaction ID : SB17.11403
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Campaign Marketing	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Charlotte Labor Day Parade		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 729 Honeysuckle Lane		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.11560
City Midland	State NC	
Zip Code 28107	Purpose of Disbursement Parade Event Fee	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Debbie Coakley		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11411
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Website Management	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	775.25
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 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Debbie Coakley		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11470
City Charlotte	State NC	
Purpose of Disbursement Website Management	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Debbie Coakley		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11525
City Charlotte	State NC	
Purpose of Disbursement Website Management	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Debbie Coakley		Date of Disbursement MM / DD / YYYY 09 / 23 / 2014
Mailing Address 5652 Cambridge Bay Dr		Amount of Each Disbursement this Period 369.77 Transaction ID : SB17.11522
City Charlotte	State NC	
Purpose of Disbursement Mileage	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1369.77
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 49 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. VINCENT EDWARD COAKLEY		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 349.38 Transaction ID : SB17.5707
City CHARLOTTE	State NC	
Zip Code 28269	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. DC Cab Company		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 40.38 Transaction ID : SB17.5707.0 [MEMO ITEM]
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Transportation	Category/ Type 002
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Charlotte Airport		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 5501 R C Josh Birmingham Pkwy		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5707.1 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28208	Purpose of Disbursement Parking	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	349.38
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 50 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 142.00
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Airfare	Transaction ID : SB17.5707.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Washington Metro Transit		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 355 First Street SE		Amount of Each Disbursement this Period 10.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Transportation	Transaction ID : SB17.5707.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Matchbox		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 521 8th Street SE		Amount of Each Disbursement this Period 34.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5707.4 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 51 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bullfeathers		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 410 1st street SE		Amount of Each Disbursement this Period 39.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5707.5 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 25.00
City Washington	State DC	
Zip Code 20014	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5707.6 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Washington Metro Transit		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 355 First Street SE		Amount of Each Disbursement this Period 12.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Transportation	Transaction ID : SB17.5707.7 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 52 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bullfeathers		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 410 1st street SE		Amount of Each Disbursement this Period 17.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5707.8
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. VINCENT EDWARD COAKLEY		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 220.46
City CHARLOTTE	State NC	
Zip Code 28269	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.5706
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 142.00
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Airfare	Transaction ID : SB17.5706.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	220.46
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 53 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Circle K		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 8100 Poplar Tent Rd		Amount of Each Disbursement this Period 20.50
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement Gasoline	Transaction ID : SB17.5706.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Chick-Fil-A		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 3015 South Blvd		Amount of Each Disbursement this Period 8.69
City Charlotte	State NC	
Zip Code 28211	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5706.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Enterprise		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 4202 Air Ramp Rd		Amount of Each Disbursement this Period 49.27
City Charlotte	State NC	
Zip Code 28212	Purpose of Disbursement Car Rental	Transaction ID : SB17.5706.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 54 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. VINCENT EDWARD COAKLEY			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 5652 CAMBRIDGE BAY DRIVE			Amount of Each Disbursement this Period 434.84	
City CHARLOTTE	State NC	Zip Code 28269	Transaction ID : SB17.11416	
Purpose of Disbursement Expense Reimbursement		Category/ Type 001		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NC	District: 12			

Full Name (Last, First, Middle Initial) B. Rowan County Republican GOP			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 130 W. Innes St			Amount of Each Disbursement this Period 28.30	
City Salisbury	State NC	Zip Code 28144	Transaction ID : SB17.11416.0	
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM]	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NC	District: 12			

Full Name (Last, First, Middle Initial) c. Vista Print			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 95 Hayden Ave			Amount of Each Disbursement this Period 93.67	
City Lexington	State MA	Zip Code 02421	Transaction ID : SB17.11416.1	
Purpose of Disbursement Printing		Category/ Type 001	[MEMO ITEM]	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NC	District: 12			

SUBTOTAL of Disbursements This Page (optional).....	434.84
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 55 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. VINCENT EDWARD COAKLEY		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 37.62
City CHARLOTTE State NC Zip Code 28269	Purpose of Disbursement Mileage 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11416.2 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Carriage Cleaners		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 13024 Eastfield Rd #A1		Amount of Each Disbursement this Period 275.25
City Huntersville State NC Zip Code 28078	Purpose of Disbursement Office Supplies 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11416.3 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. VINCENT EDWARD COAKLEY		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 361.08
City CHARLOTTE State NC Zip Code 28269	Purpose of Disbursement Mileage 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11483
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	361.08
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 56 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. VINCENT EDWARD COAKLEY		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 5652 CAMBRIDGE BAY DRIVE		Amount of Each Disbursement this Period 667.41 Transaction ID : SB17.11505
City CHARLOTTE	State NC Zip Code 28269	
Purpose of Disbursement Mileage	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Thomas Datwyler		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 3365 Cherry Lane Unit D		Amount of Each Disbursement this Period 625.00 Transaction ID : SB17.11426
City Woodbury	State MN Zip Code 55129	
Purpose of Disbursement Accounting and Reporting	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 1637.35 Transaction ID : SB17.5665
City Charlotte	State NC Zip Code 28277	
Purpose of Disbursement Expense Reimbursement	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2929.76
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 58 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. DC Cab Company		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 14.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Transportation	Transaction ID : SB17.5665.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 533.50
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Airfare	Transaction ID : SB17.5665.4
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Hotels.com		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 5400 LBJ Freeway Ste 500		Amount of Each Disbursement this Period 426.22
City Dallas	State TX	
Zip Code 75240	Purpose of Disbursement Lodging	Transaction ID : SB17.5665.5
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 59 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Morgan, Meredith and Associates		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 22780 Indian Creek Drive #100		Amount of Each Disbursement this Period 500.00
City Dullas State VA Zip Code 20166	Purpose of Disbursement Event Registration Fee	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5665.6 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 1500.00
City Charlotte State NC Zip Code 28277	Purpose of Disbursement July Retainer	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11394
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 1500.00
City Charlotte State NC Zip Code 28277	Purpose of Disbursement August Retainer	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11442
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 60 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dyce Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014		
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235			Amount of Each Disbursement this Period 77.00		
City Charlotte	State NC	Zip Code 28277	Transaction ID : SB17.11452		
Purpose of Disbursement Expense Reimbursement		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) B. MailChimp			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014		
Mailing Address 512 Means St Ste 404			Amount of Each Disbursement this Period 50.00		
City Atlanta	State GA	Zip Code 30318	Transaction ID : SB17.11452.0		
Purpose of Disbursement E-Mail Fee		Category/ Type 001	[MEMO ITEM]		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) c. Dilworth Neighborhood Grille			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014		
Mailing Address 911 E Morehead St			Amount of Each Disbursement this Period 27.00		
City Charlotte	State NC	Zip Code 28204	Transaction ID : SB17.11452.1		
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM]		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

SUBTOTAL of Disbursements This Page (optional).....	77.00
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 61 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dyce Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014		
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235			Amount of Each Disbursement this Period 89.75		
City Charlotte	State NC	Zip Code 28277	Transaction ID : SB17.11456		
Purpose of Disbursement Web Production		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) B. Dyce Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014		
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235			Amount of Each Disbursement this Period 1660.10		
City Charlotte	State NC	Zip Code 28277	Transaction ID : SB17.11521		
Purpose of Disbursement Expense Reimbursement		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) c. MailChimp			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014		
Mailing Address 512 Means St Ste 404			Amount of Each Disbursement this Period 50.00		
City Atlanta	State GA	Zip Code 30318	Transaction ID : SB17.11521.0		
Purpose of Disbursement E-mail Fee		Category/ Type 001	[MEMO ITEM]		
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

SUBTOTAL of Disbursements This Page (optional).....	1749.85
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 62 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Hotels.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 5400 LBJ Freeway Ste 500		Amount of Each Disbursement this Period 483.96
City Dallas State TX Zip Code 75240	Purpose of Disbursement Lodging	Transaction ID : SB17.11521.1
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 242.70
City Fort Worth State TX Zip Code 76155	Purpose of Disbursement Airfare	Transaction ID : SB17.11521.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Morgan, Meredith and Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 22780 Indian Creek Drive #100		Amount of Each Disbursement this Period 750.00
City Dullas State VA Zip Code 20166	Purpose of Disbursement September Retainer	Transaction ID : SB17.11521.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 63 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. International Civil Rights Center & Museum		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 134 South Elm Street		Amount of Each Disbursement this Period 133.44
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Meeting Room Rental	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11521.4 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Dyce Communications, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 14215 Ballantyne Lake Rd. Ste. 235		Amount of Each Disbursement this Period 134.99
City Charlotte State NC Zip Code 28277	Purpose of Disbursement Web Production	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11533
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 250.76
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Online Ads	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11389
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	385.76
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 64 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 85.62 Transaction ID : SB17.11436
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Ads 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1601 S. California Ave.		Amount of Each Disbursement this Period 132.38 Transaction ID : SB17.11478
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Ads 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 11325 Random Hills Road		Amount of Each Disbursement this Period 133.87 Transaction ID : SB17.11387
City Fairfax State VA Zip Code 22030	Purpose of Disbursement Bank Fees 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	351.87
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 65 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Global Payments		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period 197.73 Transaction ID : SB17.11385
City Rockville	State MD	
Zip Code 20855	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Cindy Godwin		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 646 Motsinger Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11508
City Thomasville	State NC	
Zip Code 27360	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Good Eye Me		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 11429 Ridge Oak Drive		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.11517
City Charlotte	State NC	
Zip Code 28273	Purpose of Disbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	847.73
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 66 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Gregory Wigfall Productions			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014		
Mailing Address 2153 Majestic Poplar Drive			Amount of Each Disbursement this Period 1000.00		
City Washaw	State NC	Zip Code 28173	Transaction ID : SB17.11512		
Purpose of Disbursement Video Production		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) B. Tremone Jackson			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014		
Mailing Address 4211 Craig Avenue			Amount of Each Disbursement this Period 2500.00		
City Charlottee	State NC	Zip Code 28211	Transaction ID : SB17.11446		
Purpose of Disbursement Salary		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

Full Name (Last, First, Middle Initial) c. Tremone Jackson			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014		
Mailing Address 4211 Craig Avenue			Amount of Each Disbursement this Period 2500.00		
City Charlottee	State NC	Zip Code 28211	Transaction ID : SB17.11479		
Purpose of Disbursement Salary		Category/ Type 001			
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NC	District: 12				

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 67 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Justunfollow.com		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 1207 Real Tech Park Section 30A		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.11401
City Vashi Mumbai	State ZZ Zip Code 40703	
Purpose of Disbursement Social Media Management	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Justunfollow.com		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1207 Real Tech Park Section 30A		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.11439
City Vashi Mumbai	State ZZ Zip Code 40703	
Purpose of Disbursement Social Media Management	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. Justunfollow.com		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 1207 Real Tech Park Section 30A		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.11516
City Vashi Mumbai	State ZZ Zip Code 40703	
Purpose of Disbursement Social Meida Management	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	59.97
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 68 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Levine Properties		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 8514 Mcalpine Park Drive		Amount of Each Disbursement this Period 114.35 Transaction ID : SB17.11529
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Phone Keys	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.11390
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Sean McGowan		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 7782 Cotswold Ct		Amount of Each Disbursement this Period 32.41 Transaction ID : SB17.11406
City Charlotte	State NC	
Zip Code 28213	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	2546.76
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 69 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. FedEx		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		05		2014
M M	/	D D	/	Y Y Y Y								
07		05		2014								
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28210</td> </tr> </table>		City	State	Zip Code	Charlotte	NC	28210	<table border="1"> <tr> <td>14.41</td> </tr> </table>	14.41			
City	State	Zip Code										
Charlotte	NC	28210										
14.41												
Purpose of Disbursement Shipping		Transaction ID : SB17.11406.0										
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		[MEMO ITEM]										
<table border="1"> <tr> <td>Office Sought:</td> <td> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> <tr> <td>State: NC</td> <td>District: 12</td> <td></td> </tr> </table>		Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC	District: 12						
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State: NC	District: 12											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Rowan County Republican GOP		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		05		2014
M M	/	D D	/	Y Y Y Y								
07		05		2014								
Mailing Address 130 W. Innes St		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Salisbury</td> <td>NC</td> <td>28144</td> </tr> </table>		City	State	Zip Code	Salisbury	NC	28144	<table border="1"> <tr> <td>18.00</td> </tr> </table>	18.00			
City	State	Zip Code										
Salisbury	NC	28144										
18.00												
Purpose of Disbursement Posters		Transaction ID : SB17.11406.1										
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		[MEMO ITEM]										
<table border="1"> <tr> <td>Office Sought:</td> <td> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> <tr> <td>State: NC</td> <td>District: 12</td> <td></td> </tr> </table>		Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC	District: 12						
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State: NC	District: 12											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. MDI Imaging and Mail		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		05		2014
M M	/	D D	/	Y Y Y Y								
09		05		2014								
Mailing Address 21955 Cascades Parkway		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Dulles</td> <td>VA</td> <td>20166</td> </tr> </table>		City	State	Zip Code	Dulles	VA	20166	<table border="1"> <tr> <td>1565.12</td> </tr> </table>	1565.12			
City	State	Zip Code										
Dulles	VA	20166										
1565.12												
Purpose of Disbursement Postage		Transaction ID : SB17.11378										
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE												
<table border="1"> <tr> <td>Office Sought:</td> <td> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> <tr> <td>State: NC</td> <td>District: 12</td> <td></td> </tr> </table>		Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC	District: 12						
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State: NC	District: 12											

SUBTOTAL of Disbursements This Page (optional).....	1565.12
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 70 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. MDI Imaging and Mail		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 21955 Cascades Parkway		Amount of Each Disbursement this Period 3510.52 Transaction ID : SB17.11380
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Moes South West Grill		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 201 East Trade Street		Amount of Each Disbursement this Period 24.31 Transaction ID : SB17.11427
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Food and Beverage	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Morgan, Meredith and Associates		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 22780 Indian Creek Drive #100		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11414
City Dullas	State VA	
Zip Code 20166	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	4034.83
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 71 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Philip Morgan		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1536 Prancer Ct.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11480
City Gastonia	State NC	
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Nationwide		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 3390 Atlantic Ave Ste. 2		Amount of Each Disbursement this Period 38.90 Transaction ID : SB17.11472
City Brooklyn	State NY	
Purpose of Disbursement Insurance	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Nationwide		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 3390 Atlantic Ave Ste. 2		Amount of Each Disbursement this Period 48.90 Transaction ID : SB17.11528
City Brooklyn	State NY	
Purpose of Disbursement Insurance	Category/ Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	587.80
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 72 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ninth Street Investors		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.11398
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Ninth Street Investors		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.11399
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Parking	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. Ninth Street Investors		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 82.35 Transaction ID : SB17.11400
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Telephones	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1172.35
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 73 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ninth Street Investors		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.11444
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Ninth Street Investors		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.11445
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Parking	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. Ninth Street Investors		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.11510
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2090.00
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 74 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ninth Street Investors		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 8514 MacApline Park Drive Ste. 190		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.11511
City Charlotte	State NC Zip Code 28211	
Purpose of Disbursement Parking	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. OE Acceleration Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 110 E. 30th Ste. 790133		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.11391
City Charlotte	State NC Zip Code 28206	
Purpose of Disbursement Video	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 6.10 Transaction ID : SB17.11451
City San Jose	State CA Zip Code 95131	
Purpose of Disbursement Credit Card Fees	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1096.10
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 75 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 95.66 Transaction ID : SB17.11457
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 68.11 Transaction ID : SB17.11461
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period 40.62 Transaction ID : SB17.11519
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	204.39
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)		PAGE 76 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. PayPal		M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 2211 N. First St.		Amount of Each Disbursement this Period
City San Jose State CA Zip Code 95131		23.56
Purpose of Disbursement Credit Card Fees		Transaction ID : SB17.11526
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. PostNet Print & Copy Center		M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 5806-A2 Prosperity Church rd		Amount of Each Disbursement this Period
City Charlotte State NC Zip Code 28269		80.44
Purpose of Disbursement Printing		Transaction ID : SB17.11393
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Jay Rao		M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period
City Charlotte State NC Zip Code 28226		1950.46
Purpose of Disbursement Expense Reimbursement		Transaction ID : SB17.5656
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2054.46
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 77 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 1267.50
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Transaction ID : SB17.5656.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 141.54
City Charlotte	State NC	
Zip Code 28216	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5656.1
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Mac Paper		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 2405 S Tryon St		Amount of Each Disbursement this Period 155.67
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5656.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 78 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 61.88
City Charlotte	State NC	
Zip Code 28216	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5656.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 199.40
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Printing	Transaction ID : SB17.5656.4 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 500 Tyvola Road		Amount of Each Disbursement this Period 64.43
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5656.5 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 79 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 847.13 Transaction ID : SB17.5656.6
City Charlotte	State NC	
Zip Code 28216	Purpose of Disbursement Office Supplies	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	State: NC	[MEMO ITEM]
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 847.13 Transaction ID : SB17.5647
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	State: NC	[MEMO ITEM]
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	District: 12	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.5647.0
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Category/Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	State: NC	[MEMO ITEM]
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	847.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael's		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 4337 Park Road		Amount of Each Disbursement this Period 302.27
City Charlotte	State NC	
Zip Code 28209	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5647.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 59.41
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Shipping	Transaction ID : SB17.5647.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Mac Paper		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 2405 S Tryon St		Amount of Each Disbursement this Period 24.68
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5647.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 81 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 70.77
City Charlotte	State NC	Zip Code 28216
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	
		Transaction ID : SB17.5647.4 [MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00
City Charlotte	State NC	Zip Code 28226
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	
		Transaction ID : SB17.11397

Full Name (Last, First, Middle Initial) c. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 1087.25
City Charlotte	State NC	Zip Code 28226
Purpose of Disbursement Fundraising Commission	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 7/17/2014	
State: NC	District: 12	
		Transaction ID : SB17.11409

SUBTOTAL of Disbursements This Page (optional).....	4087.25
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 82 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 249.93 Transaction ID : SB17.11428
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 8658 Jw Clay Blvd		Amount of Each Disbursement this Period 78.75 Transaction ID : SB17.11428.0 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Ink	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. FedEx		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 8.00 Transaction ID : SB17.11428.1 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	249.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Macklenburg Republican Party		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 500 E Morehead Ste. 104		Amount of Each Disbursement this Period 7.69
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11428.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 105.49
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11428.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. PizzaHut		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 3044 Eastway Dr		Amount of Each Disbursement this Period 50.00
City Charlotte	State NC	
Zip Code 28205	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11428.4
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 84 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.11450
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 609.71 Transaction ID : SB17.11462
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 438.75 Transaction ID : SB17.11462.0 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3609.71
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 85 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 8658 Jw Clay Blvd		Amount of Each Disbursement this Period 78.75
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11462.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 10239 perimeter parkway		Amount of Each Disbursement this Period 92.21
City Charlotte	State NC	
Zip Code 28216	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11462.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Jay Rao		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 700.82
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.11463
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	700.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 500 Tyvola Road		Amount of Each Disbursement this Period 700.82
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11463.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Jay Rao		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 1011.75
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Commission	Transaction ID : SB17.11476
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Jay Rao		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 3000.00
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.11515
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	4011.75
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 87 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jay Rao		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 1323.24 Transaction ID : SB17.11524
City Charlotte	State NC Zip Code 28226	
Purpose of Disbursement Expense Reimbursement	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 341.25 Transaction ID : SB17.11524.0 [MEMO ITEM]
City Charlotte	State NC Zip Code 28217	
Purpose of Disbursement Stamps	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 8658 Jw Clay Blvd		Amount of Each Disbursement this Period 70.77 Transaction ID : SB17.11524.1 [MEMO ITEM]
City Charlotte	State NC Zip Code 28262	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1323.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement MM / DD / YYYY 09 / 24 / 2014
Mailing Address 4717 Sharon Rd		Amount of Each Disbursement this Period 334.54
City Charlotte	State NC	
Zip Code 28210	Purpose of Disbursement Printing and Supplies	Transaction ID : SB17.11524.2
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Harris Teeter		Date of Disbursement MM / DD / YYYY 09 / 24 / 2014
Mailing Address 850 Jake Alexander Blvd		Amount of Each Disbursement this Period 13.46
City Salsbury	State NC	
Zip Code 28145	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11524.3
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement MM / DD / YYYY 09 / 24 / 2014
Mailing Address 500 Tyvola Road		Amount of Each Disbursement this Period 243.34
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11524.4
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 89 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Whole Foods		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 3540 Wade Ave		Amount of Each Disbursement this Period 58.22
City Raleigh	State NC	
Zip Code 27607	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11524.5
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Maggiano's		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 4400 Sharon Road		Amount of Each Disbursement this Period 73.83
City Charlotte	State NC	
Zip Code 28211	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11524.6
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Suarez Bakery		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 4245 Park Road		Amount of Each Disbursement this Period 22.83
City Charlotte	State NC	
Zip Code 28209	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11524.7
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 90 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NORTH CAROLINA REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 1506 HILLSBOROUGH STREET		Amount of Each Disbursement this Period 100.00
City RALEIGH State NC Zip Code 27605	Purpose of Disbursement Event Registration Fee	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11524.8 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. RST Marketing		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1272 Corporate Park Road		Amount of Each Disbursement this Period 2178.47
City Forest State VA Zip Code 24551	Purpose of Disbursement Postage	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11383
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Southwest Publishing & Mailing Corp		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 4000 SE Adams St		Amount of Each Disbursement this Period 5760.94
City Topeka State KS Zip Code 66609	Purpose of Disbursement Postage	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.11376
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	7939.41
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 91 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Spartan Multi-Media		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 816 Morning Glory Drive		Amount of Each Disbursement this Period 50.00
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Advertising	Transaction ID : SB17.11448
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Spartan Multi-Media		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address 816 Morning Glory Drive		Amount of Each Disbursement this Period 350.00
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Advertising	Transaction ID : SB17.11460
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Sprint		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 6391 Sprint Pkwy		Amount of Each Disbursement this Period 195.88
City Overland Park	State KS	
Zip Code 66251	Purpose of Disbursement Phones	Transaction ID : SB17.11404
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	595.88
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 92 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Sprint		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 6391 Sprint Pkwy		Amount of Each Disbursement this Period 473.54 Transaction ID : SB17.11475
City Overland Park	State KS Zip Code 66251	
Purpose of Disbursement Phones	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. SRH Media		Date of Disbursement MM / DD / YYYY 09 / 23 / 2014
Mailing Address PO Box 367		Amount of Each Disbursement this Period 12800.00 Transaction ID : SB17.11562
City Spencerville	State MD Zip Code 20868	
Purpose of Disbursement Radio Advertising	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Strategic Impact		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 333 West Vine St Suite 300		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.11481
City Lexington	State KY Zip Code 40517	
Purpose of Disbursement Campaign Marketing	Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	14473.54
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 93 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 219.97 Transaction ID : SB17.5666
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10700 Reames Rd		Amount of Each Disbursement this Period 23.00 Transaction ID : SB17.5666.0 [MEMO ITEM]
City Charlotte	State NC	
Zip Code 28269	Purpose of Disbursement Gasoline	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

Full Name (Last, First, Middle Initial) c. Harrisburg Family House Restaurant		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 5429 N Carolina 49		Amount of Each Disbursement this Period 34.65 Transaction ID : SB17.5666.1 [MEMO ITEM]
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Food and Beverage	Category/ Type 001
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 12	

SUBTOTAL of Disbursements This Page (optional).....	219.97
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 94 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. UHaul		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 5108 South Blvd		Amount of Each Disbursement this Period 98.94
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement Trailer Rental	Transaction ID : SB17.5666.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Burger King		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 2601 Beatties Ford Rd		Amount of Each Disbursement this Period 9.72
City Charlotte	State NC	
Zip Code 28277	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5666.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Harrahs Cherokee		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 777 Casino Drive		Amount of Each Disbursement this Period 11.29
City Cherokee	State NC	
Zip Code 28719	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5666.4 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 95 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. DataValidation		M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 75 5th St NW Suite 221		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Validation	Category/Type 001	42.37
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5666.5
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Success Mastery Leadership		M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period
City Harrisburg	State NC	Zip Code 28075
Purpose of Disbursement Expense Reimbursement	Category/Type 001	369.95
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5667
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Chick-Fil-A		M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3015 South Blvd		Amount of Each Disbursement this Period
City Charlotte	State NC	Zip Code 28211
Purpose of Disbursement Food and Beverage	Category/Type 001	135.95
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE		Transaction ID : SB17.5667.0
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	369.95
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 96 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 8658 Jw Clay Blvd		Amount of Each Disbursement this Period 53.61
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5667.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. HootSuite		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 5 East 8th Avenue		Amount of Each Disbursement this Period 9.99
City Vancouver	State ZZ	
Zip Code 40070	Purpose of Disbursement Social Media Ad	Transaction ID : SB17.5667.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. BJ's		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 13930 Promenade Commons Street		Amount of Each Disbursement this Period 113.04
City Gainesville	State NC	
Zip Code 20155	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5667.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 97 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Metrolina REIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 8318 Pineville-Matthews Rd		Amount of Each Disbursement this Period 15.00
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Event Registration Fee	Transaction ID : SB17.5667.4 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Circle K		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 8100 Poplar Tent Rd		Amount of Each Disbursement this Period 4.61
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5667.5 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Party Reflections		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3412 Monroe Rd		Amount of Each Disbursement this Period 13.90
City Charlotte	State NC	
Zip Code 28205	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5667.6 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 98 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Lowe's		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 10275 Perimeter Pkwy		Amount of Each Disbursement this Period 3800.00
City Charlotte	State NC	
Zip Code 28203	Purpose of Disbursement Office Supplies	Transaction ID : SB17.5667.7
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Ron's Quick Grocery		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 418 S Enochville Ave		Amount of Each Disbursement this Period 5.80
City Kannapolis	State NC	
Zip Code 28021	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5667.8
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Success Mastery Leadership		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Campaign Management	Transaction ID : SB17.11395
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	3800.00
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 99 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.11410
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Salary Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00 Transaction ID : SB17.11443
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Campaign Management Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 230.74 Transaction ID : SB17.11484
City Harrisburg State NC Zip Code 28075	Purpose of Disbursement Expense Reimbursement Category/Type 001	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	5530.74
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 100 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. DataValidation		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 75 5th St NW Suite 221		Amount of Each Disbursement this Period 3.49
City Atlanta	State GA Zip Code 30308	
Purpose of Disbursement E-mail Validation	Category/Type 001	Transaction ID : SB17.11484.0 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Applebees		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 3865 John Gordon Lane		Amount of Each Disbursement this Period 14.80
City Highpoint	State NC Zip Code 27265	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17.11484.1 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. Alexander Michael's Tavern		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 401 W 9th St		Amount of Each Disbursement this Period 26.27
City Charlotte	State NC Zip Code 28202	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17.11484.2 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 101 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 4.90
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Transaction ID : SB17.11484.3 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) B. Carolina Ale House		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 8695 Concord Mille Blvd		Amount of Each Disbursement this Period 27.75
City Concord	State NC	
Zip Code 28027	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11484.4 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) c. Caribbean Hut		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 9609 N Tyron St		Amount of Each Disbursement this Period 11.80
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11484.5 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 102 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Penera		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 9321 JW Clay Blvd		Amount of Each Disbursement this Period 9.18
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11484.6
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 33.58
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phones	Transaction ID : SB17.11484.7
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 2.94
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement Stamps	Transaction ID : SB17.11484.8
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 103 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mary's Gourmet Diner		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 723 N Trade Street		Amount of Each Disbursement this Period 52.03
City Winston-Salem	State NC	
Zip Code 27101	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11484.9 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Papa John's		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 1030 Freeland Dr #100		Amount of Each Disbursement this Period 44.00
City Salisbury	State NC	
Zip Code 28144	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11484.10 [MEMO ITEM]
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Success Mastery Leadership		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 148.64
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.11423
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	148.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Los Arcos		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 8619 JW Clay Blvd		Amount of Each Disbursement this Period 148.64
City Charlotte	State NC	
Zip Code 28262	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.11423.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 3800.00
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Campaign Management	Transaction ID : SB17.11482
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Success Mastery Leadership		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 1031		Amount of Each Disbursement this Period 87.00
City Harrisburg	State NC	
Zip Code 28075	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.11506
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	3887.00
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 105 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 87.00
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phones	Transaction ID : SB17.11506.0
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. Sunrise Data Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 20130 Lakeview Center Plaza		Amount of Each Disbursement this Period 1085.00
City Ashburn	State VA	
Zip Code 20147	Purpose of Disbursement List Rental	Transaction ID : SB17.11381
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) c. Team Sports & Performance Apparel		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6025 Royal Lane Ste 126		Amount of Each Disbursement this Period 633.26
City Dallas	State TX	
Zip Code 75230	Purpose of Disbursement Campaign T-Shirts	Transaction ID : SB17.11405
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1718.26
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 106 OF 108	
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Team Sports & Performance Apparel		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 6025 Royal Lane Ste 126		Amount of Each Disbursement this Period 189.44 Transaction ID : SB17.11471
City Dallas State TX Zip Code 75230	Purpose of Disbursement T-Shirts 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. The Prosper Group		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 435 E. Main Street Ste 250		Amount of Each Disbursement this Period 16500.00 Transaction ID : SB17.11531
City Greenwood State IN Zip Code 46143	Purpose of Disbursement Online Advertising 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 19.60 Transaction ID : SB17.11413
City Charlotte State NC Zip Code 28217	Purpose of Disbursement Stamps 001 Category/Type	
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NC District: 12		

SUBTOTAL of Disbursements This Page (optional).....	16709.04
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 107 OF 108			
	<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)
COAKLEY FOR CONGRESS ELECTION COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 6241 South Blvd		Amount of Each Disbursement this Period 116.00
City Charlotte	State NC	
Purpose of Disbursement Shipping	Zip Code 28217	Transaction ID : SB17.11458
Candidate Name COAKLEY FOR CONGRESS ELECTION COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 12	

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

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

SUBTOTAL of Disbursements This Page (optional).....	116.00
TOTAL This Period (last page this line number only).....	107221.98