

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

MCHENRY FOR CONGRESS

ADDRESS (number and street) PO BOX 1406

Check if different than previously reported. (ACC)

HICKORY NC 28603

2. **FEC IDENTIFICATION NUMBER** C00393629

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NC 10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 04 15 2010 through 06 30 2010

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 Catherine McHenry Rains

Signature of Treasurer Electronically Filed by Catherine McHenry Rains Date 09 14 2010

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

A. Form/Schedule : **F3A**

Transaction ID :

Schedule B includes all required additional memo entries for reimbursements. All other reimbursements do not meet the \$200.00 per vendor threshold; therefore no further itemization is necessary. All reimbursements to staff in excess of \$500 do not require any further itemization. Please note that we have net debt outstanding for the following elections: General 2008. All stipends listed on this report are paid to summer interns/volunteers to assist with the cost of living.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

MCHENRY FOR CONGRESS

Report Covering the Period:

From:

M	M
0	4

D	D
1	5

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	82648.15	762626.53
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	82648.15	762626.53
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	131658.87	642918.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	175.83	3993.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	131483.04	638924.43
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	83134.28	
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	90000.00	

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
MCHENRY FOR CONGRESS

Report Covering the Period: From:

M	M
0	4

D	D
1	5

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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	16540.00	291978.13
(i) Itemized (use Schedule A).....	3636.00	44565.08
(ii) Unitemized.....	20176.00	336543.21
(iii) TOTAL of contributions from individuals..... ▶	0.00	112.79
(b) Political Party Committees.....	62472.15	425970.53
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	82648.15	762626.53
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
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.).....	175.83	3993.58
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	82823.98	766620.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	131658.87	642918.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	115500.00
(b) Of all Other Loans.....	60000.00	60000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	60000.00	175500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	5225.00	20935.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	196883.87	839353.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	197194.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	82823.98
25. SUBTOTAL (add Line 23 and Line 24).....	280018.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	196883.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	83134.28

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 68
(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)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Matteo Agosta</p> <p>Mailing Address 8127 Peninsula Ln</p> <p>City State Zip Code Sherrills Ford NC 28673-9249</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Steele Rubber Products President</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0</p> <p>Transaction ID: 00715.C10712</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Bedford Cannon</p> <p>Mailing Address 140 Water St</p> <p>City State Zip Code Statesville NC 28677-5228</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Massey Cannon and Griffin Lawyer</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">200.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 0</p> <p>Transaction ID: 00421.C10617</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Ted Cash</p> <p>Mailing Address 2616 Oak Grove Rd</p> <p>City State Zip Code Shelby NC 28150</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Physician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 0</p> <p>Transaction ID: 00421.C10615</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	1300.00
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 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Kirsten Chadwick		Date of Receipt
	Mailing Address P.O. Box 3126		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fierce, Isakowitz, & Blalock		Occupation Partner	Transaction ID: 00715.C10765
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="500.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
Receipt			

B.	Full Name (Last, First, Middle Initial) Robert Collett		Date of Receipt
	Mailing Address 509 W Union St		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Morganton	NC	28655-4305
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Collett & Associates		Occupation Real Estate Developer	Transaction ID: 00425.C10626
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="4800.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="1900.00"/>
Receipt			

C.	Full Name (Last, First, Middle Initial) John Collins		Date of Receipt
	Mailing Address 5961 Searl Ter		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Bethesda	MD	20816-2022
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Steptoe & Johnson, Nash, Pc		Occupation Attorney	Transaction ID: 00502.C10633
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="2000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="2000.00"/>
Receipt			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 68

(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Michael Crowder

Mailing Address 7501 Cleyera Circle

City State Zip Code
Waxhaw NC 28173

FEC ID number of contributing federal political committee. C

Name of Employer: Products for Good Occupation: Managing Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 03 / 2010

Transaction ID: 00715.C10674

Amount of Each Receipt this Period 1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Michael Dane

Mailing Address 145 Old Post Rd

City State Zip Code
Mooreville NC 28117-6009

FEC ID number of contributing federal political committee. C

Name of Employer: Dane Construction Inc. Occupation: President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2010

Transaction ID: 00715.C10681

Amount of Each Receipt this Period 1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Nancy Epperson

Mailing Address 3780 Wil Scarlet Road

City State Zip Code
Winston Salem NC 27104

FEC ID number of contributing federal political committee. C

Name of Employer: Piedmont Baptist College Occupation: College Professor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 16 / 2010

Transaction ID: 00418.C10607

Amount of Each Receipt this Period 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
		<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) John Gaine		Date of Receipt
	Mailing Address 5936 Searl Terrace		<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Bethesda	MD	20816-2023
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Ferguson Group		Occupation Government Affairs	Transaction ID: 00715.C10711
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General		<input type="text" value="250.00"/>
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) John Gilleland		Date of Receipt
	Mailing Address 119 Labans Lane		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lincolnton	NC	28092
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Gilleland & Associates		Occupation Owner	Transaction ID: 00502.C10643
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text" value="250.00"/>
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Edgar Hart		Date of Receipt
	Mailing Address 198 Oak Village Pkwy		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mooreville	NC	28117
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 00425.C10628
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text" value="75.00"/>
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="200.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="575.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Beth Hill		Date of Receipt
	Mailing Address 4617 21st Street Ct NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 8 / 2 0 1 0
	City	State	Zip Code
	Hickory	NC	28601-1785
	FEC ID number of contributing federal political committee. C		Transaction ID: 00502.C10657
Name of Employer Self Employed		Occupation Medical Transcriptionist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			Receipt

B.	Full Name (Last, First, Middle Initial) Beth Hill		Date of Receipt
	Mailing Address 4617 21st Street Ct NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Hickory	NC	28601-1785
	FEC ID number of contributing federal political committee. C		Transaction ID: 00715.C10778
Name of Employer Self Employed		Occupation Medical Transcriptionist	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 750.00
			Receipt

C.	Full Name (Last, First, Middle Initial) Gordon Hirshman		Date of Receipt
	Mailing Address 8446 Pine Lake Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 1 / 2 0 1 0
	City	State	Zip Code
	Denver	NC	28037-8814
	FEC ID number of contributing federal political committee. C		Transaction ID: 00421.C10614
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 300.00
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1550.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Anne Klein

Mailing Address 137 Lakewood Drive

City State Zip Code
Kings Mountain NC 28086

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 0

Transaction ID: 00421.C10612

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
George Lange

Mailing Address 6104 Yeats Manor Drive

City State Zip Code
Tampa FL 33616

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

Name of Employer Regions Morgan Keegan Trust Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 1 0

Transaction ID: 00715.C10728

Amount of Each Receipt this Period
500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Sharon McKenzie

Mailing Address 1751 Robinwood Road

City State Zip Code
Gastonia NC 28054-1620

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 00502.C10639

Amount of Each Receipt this Period
110.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **810.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles Meakin
Mailing Address 2325 Armstrong Cir
City State Zip Code
Gastonia NC 28054-7214
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Caromont Physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 1 0
Transaction ID: 00715.C10767
Amount of Each Receipt this Period
500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Roscoe Mellor
Mailing Address 11 W. 8th St. Apt. 6F
City State Zip Code
New York NY 10011
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Information Requested Information Requested
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 1 0
Transaction ID: 00715.C10747
Amount of Each Receipt this Period
250.00
Receipt

C. Full Name (Last, First, Middle Initial)
David Morgan
Mailing Address 316 Tennessee Cir
City State Zip Code
Mooresville NC 28117-8466
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 1 0
Transaction ID: 00715.C10671
Amount of Each Receipt this Period
200.00
Receipt

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: PAGE 13 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Crystal Rogers

Mailing Address 310 4th Street S.W.

City State Zip Code
Hickory NC 28602

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

Name of Employer Occupation
Elite Properties, Inc. Realtor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: 00502.C10668

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1081 Long Drive

City State Zip Code
Newton NC 28658

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 7 / 2 0 1 0

Transaction ID: 00715.C10717

Amount of Each Receipt this Period
55.00

Receipt

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

Mailing Address 10 Oldenberg Court

City State Zip Code
Creston NC 28615-6040

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

Name of Employer Occupation
Gaston Hospital CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: 00502.C10666

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1305.00**

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 14 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jerry Sellers

Mailing Address 8149 Deep Water Lane

City State Zip Code
Denver NC 28037

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

Name of Employer Retired Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 1 0

Transaction ID: 00421.C10613

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address P.O. Box 228

City State Zip Code
Hickory NC 28603

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

Name of Employer Shurtape Technologies Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 1 0

Transaction ID: 00715.C10763

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1940 Shoreham Dr

City State Zip Code
Charlotte NC 28211-2136

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

Name of Employer Shurtape Tech, LLC Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 1 0

Transaction ID: 00715.C10687

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 15 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jennie Stultz

Mailing Address 2985 Heritage Commons Lane

City State Zip Code
Gastonia NC 28054

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

Name of Employer Leading by Design, Inc. Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 1 0

Transaction ID: 00715.C10707

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 300 W. Main Street

City State Zip Code
Cherryville NC 28021

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

Name of Employer Self Employed Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 4 / 2 0 1 0

Transaction ID: 00715.C10700

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1919 E. 8th Street

City State Zip Code
Charlotte NC 28204

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

Name of Employer Atlas Principals, LLC Occupation Asset Allocator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 1 0

Transaction ID: 00502.C10669

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

TOTAL This Period (last page this line number only) ► **16540.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AKFCF PAC
Mailing Address PO Box 26366
City Alexandria State VA Zip Code 22313
FEC ID number of contributing federal political committee. **C** C00412098
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 06 / 30 / 2010
Transaction ID: 00715.C10785
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Alex Lee Inc. PAC
Mailing Address 120 4th St SW
City Hickory State NC Zip Code 28602-2947
FEC ID number of contributing federal political committee. **C** C00371385
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 04 / 16 / 2010
Transaction ID: 00418.C10609
Amount of Each Receipt this Period 5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
American Bankers Assn. PAC (BANKPAC)
Mailing Address 1120 Connecticut Avenue NW
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00004275
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00
Date of Receipt 05 / 26 / 2010
Transaction ID: 00715.C10745
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 7000.00
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 17 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Financial Services Association
Mailing Address 919 18th St NW

City Washington State DC Zip Code 20006-5519

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: 00715.C10777
 Amount of Each Receipt this Period 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
American Veterinary Medical Association
Mailing Address 1910 Sunderland Place NW

City Washington State DC Zip Code 20036-1642

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 21 / 2010
Transaction ID: 00715.C10730
 Amount of Each Receipt this Period 2000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
AT&T Federal PAC
Mailing Address 175 E Houston St Rm 7-A-50

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼
 G-2008 Debt Retirement

Election Cycle-to-Date ▼ 11000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: 00715.C10783
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 18 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Blue Cross & Blue Shield of NC Employees
Mailing Address PO Box 2291

City State Zip Code
Durham NC 27702-2291

FEC ID number of contributing federal political committee. **C** C00312223

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Transaction ID: 00418.C10608

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Build Political Action Committee
Mailing Address 1201 15th St NW

City State Zip Code
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: 00502.C10667

Amount of Each Receipt this Period
4000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Carolinas HealthCare System Employees PA
Mailing Address PO Box 32861

City State Zip Code
Charlotte NC 28232-2861

FEC ID number of contributing federal political committee. **C** C00423871

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 1 0

Transaction ID: 00715.C10675

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 19 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carolinas HealthCare System Employees PA

Mailing Address PO Box 32861

City State Zip Code
Charlotte NC 28232-2861

FEC ID number of contributing federal political committee. **C** C00423871

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 1 0

Transaction ID: 00715.C10709

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 JFK Boulevard

City State Zip Code
Philadelphia PA 19103-2838

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 1 0

Transaction ID: 00715.C10766

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Commercial Mortgage Securites Assoc. PAC

Mailing Address 30 Broad St Fl 28
28th Floor

City State Zip Code
New York NY 10004-2956

FEC ID number of contributing federal political committee. **C** C00411173

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 8 / 2 0 1 0

Transaction ID: 00715.C10771

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 20 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Conservative Victory Fund

Mailing Address 104 N Carolina Ave SE

City State Zip Code
Washington DC 20003-1841

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3661.58

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 8 / 2 0 1 0

Transaction ID: 00502.C10645

Amount of Each Receipt this Period
413.20

In-kind
In-kind: Create/Fax Anno-uncem

B. Full Name (Last, First, Middle Initial)
Council Of Insurance Agents & Brokers

Mailing Address 701 Pennsylvania Ave NW Ste 750
Suite 750

City State Zip Code
Washington DC 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 8 / 2 0 1 0

Transaction ID: 00715.C10773

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Avenue Nw
South Building Suite 600b

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 4 / 2 0 1 0

Transaction ID: 00715.C10678

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2413.20**

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 21 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Deloitte & Touche Federal PAC
 Mailing Address PO Box 365
 City Washington State DC Zip Code 20044-0365
 FEC ID number of contributing federal political committee. **C** C00211318
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 8500.00
 Date of Receipt 06 / 11 / 2010
Transaction ID: 00715.C10748
 Amount of Each Receipt this Period 2000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC
 Mailing Address 422 South Church Street, PBO5D
 City Charlotte State NC Zip Code 28202
 FEC ID number of contributing federal political committee. **C** C00083535
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6500.00
 Date of Receipt 06 / 28 / 2010
Transaction ID: 00715.C10770
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
General Electric Company PAC
 Mailing Address 1299 Pennsylvania Ave NW Ste 1100
 City Washington State DC Zip Code 20004-2414
 FEC ID number of contributing federal political committee. **C** C00024869
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00
 Date of Receipt 06 / 28 / 2010
Transaction ID: 00715.C10774
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 22 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Genworth Financial Inc. PAC

Mailing Address 6620 W Broad St

City Richmond State VA Zip Code 23230-1716

FEC ID number of contributing federal political committee. **C** C00404194

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 06 / 28 / 2010
Transaction ID: 00715.C10769
 Amount of Each Receipt this Period 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Independent Insurance Agents Of America

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 06 / 28 / 2010
Transaction ID: 00715.C10776
 Amount of Each Receipt this Period 3000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
JP Morgan Chase & Co. PAC

Mailing Address 230 Park Ave Fl 21
21st Floor

City New York State NY Zip Code 10169-2403

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8500.00

Date of Receipt 06 / 11 / 2010
Transaction ID: 00715.C10749
 Amount of Each Receipt this Period 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 9000.00

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 23 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Majority Committee PAC MCPAC
Mailing Address P.O. Box 10134

City State Zip Code
Bakersfield CA 93389-0134

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3208.95

Date of Receipt

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

Transaction ID: 00715.C10790
 Amount of Each Receipt this Period 208.95
 In-kind
 In-kind: Supplies

B. Full Name (Last, First, Middle Initial)
Merck Employees PAC
Mailing Address 601 Pennsylvania Ave. NW, Suite 12

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: 00715.C10781
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
National Assoc. of Mutual Insurance Co.
Mailing Address 122 C. Street, N.W. Suite 540

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	8	/	2	0	1	0

Transaction ID: 00715.C10772
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **2208.95**

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 24 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
National Association of Chain Drug Store
Mailing Address 413 N. Lee Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 7 / 2 0 1 0
Transaction ID: 00715.C10727
 Amount of Each Receipt this Period
 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn. PAC
Mailing Address 1101 King St Ste 600

City State Zip Code
Alexandria VA 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 1 0
Transaction ID: 00715.C10786
 Amount of Each Receipt this Period
 2500.00
 Receipt

C. Full Name (Last, First, Middle Initial)
National Restaurant Association PAC
Mailing Address 1200 17th St NW

City State Zip Code
Washington DC 20036-3004

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 1 0
Transaction ID: 00715.C10677
 Amount of Each Receipt this Period
 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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
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FOR LINE NUMBER: PAGE 25 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NRA Political Victory Fund
Mailing Address 11250 Waples Mill Rd
City State Zip Code
Fairfax VA 22030-7400
FEC ID number of contributing federal political committee. **C** C00053553
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4950.00
Date of Receipt: 05 / 03 / 2010
Transaction ID: 00715.C10670
Amount of Each Receipt this Period: 1950.00
Receipt

B. Full Name (Last, First, Middle Initial)
Parkdale PAC
Mailing Address P.O. Box 1787
City State Zip Code
Gastonia NC 28053
FEC ID number of contributing federal political committee. **C** C00470070
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt: 05 / 04 / 2010
Transaction ID: 00715.C10680
Amount of Each Receipt this Period: 2400.00
Receipt

C. Full Name (Last, First, Middle Initial)
Real Estate Investment Trusts PAC
Mailing Address 1875 I St NW Ste 600
City State Zip Code
Washington DC 20006-5413
FEC ID number of contributing federal political committee. **C** C00303339
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00
Date of Receipt: 06 / 30 / 2010
Transaction ID: 00715.C10780
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 5350.00
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 26 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Southeast Anesthesia Associates PAC
Mailing Address PO Box 36351

City State Zip Code
Charlotte NC 28236-6351

FEC ID number of contributing federal political committee. **C** C00306878

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	0

Transaction ID: 00715.C10676
 Amount of Each Receipt this Period
 5000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
The Chickasaw Nation
Mailing Address 520 Arlington St

City State Zip Code
Ada OK 74820-2204

FEC ID number of contributing federal political committee. **C** C90007923

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	1	0

Transaction ID: 00715.C10746
 Amount of Each Receipt this Period
 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
UPSPAC
Mailing Address 316 Pennsylvania Avenue, SE

City State Zip Code
Washington DC 20003-1185

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	8	/	2	0	1	0

Transaction ID: 00715.C10775
 Amount of Each Receipt this Period
 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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 27 / 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UsBancorp Political Participation Prog.
Mailing Address 800 Nicollet Mall
BC-MN-H21O
City Minneapolis State MN Zip Code 55402-7000
FEC ID number of contributing federal political committee. **C** C00018036
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 05 / 04 / 2010
Transaction ID: 00715.C10679
Amount of Each Receipt this Period 2000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Verizon Wireless PAC
Mailing Address 1300 I Street, NW, Suite 400 West
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00186288
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 06 / 30 / 2010
Transaction ID: 00715.C10784
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Wal-Mart Stores Inc. PAC for Responsible
Mailing Address 702 SW 8th St
City Bentonville State AR Zip Code 72716-6209
FEC ID number of contributing federal political committee. **C** C00093054
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt 06 / 30 / 2010
Transaction ID: 00715.C10782
Amount of Each Receipt this Period 2000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 5000.00
TOTAL This Period (last page this line number only) ► 62472.15

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Advantage, Inc <hr/> Mailing Address 1611 N. Kent Street Suite 905 <hr/> City Arlington State VA Zip Code 22209- <hr/> Purpose of Disbursement Automated Call Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3654 Date of Disbursement 05 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 150.00 <hr/> AUTOMATED CALL SERVICE
B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc <hr/> Mailing Address 205 Pennsylvania Ave Se <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement Computer Support Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3658 Date of Disbursement 05 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 2100.00 <hr/> COMPUTER SUPPORT FEE
C.	Full Name (Last, First, Middle Initial) Avery Banner Elk Chamber Of Commerce <hr/> Mailing Address Po Box 335 <hr/> City Banner Elk State NC Zip Code 28604- <hr/> Purpose of Disbursement Membership Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3659 Date of Disbursement 05 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 225.00 <hr/> MEMBERSHIP FEE

SUBTOTAL of Disbursements This Page (optional) ▶	2475.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Burke County Chamber Of Commerce <hr/> Mailing Address 110 E Meeting St <hr/> City Morganton State NC Zip Code 28655- <hr/> Purpose of Disbursement Membership Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3664 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 225.00
	MEMBERSHIP FEE
	Category/Type
B. Full Name (Last, First, Middle Initial) Dawn Burris <hr/> Mailing Address 2101 Redberry Ln <hr/> City Conover State NC Zip Code 28613- <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3750 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 147.76
	SALARY
	Category/Type
C. Full Name (Last, First, Middle Initial) Catawba Print & Mail, Inc <hr/> Mailing Address PO Box 9001 <hr/> City Hickory State NC Zip Code 28603-9001 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3667 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 4490.47
	PRINTING
	Category/Type

SUBTOTAL of Disbursements This Page (optional)	4863.23
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 30 / 68

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Century Link Mailing Address PO Box 96064 City Charlotte State NC Zip Code 28296-0064 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3700 Date of Disbursement 04 / 30 / 2010 Amount of Each Disbursement this Period 404.40 TELEPHONE EXPENSE
B.	Full Name (Last, First, Middle Initial) Century Link Mailing Address PO Box 96064 City Charlotte State NC Zip Code 28296-0064 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3701 Date of Disbursement 06 / 15 / 2010 Amount of Each Disbursement this Period 417.35 TELEPHONE EXPENSE
C.	Full Name (Last, First, Middle Initial) Charlotte Chamber of Commerce Mailing Address PO Box 32785 City Charlotte State NC Zip Code 28232- Purpose of Disbursement Membership Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3679 Date of Disbursement 06 / 15 / 2010 Amount of Each Disbursement this Period 200.00 MEMBERSHIP DUES

SUBTOTAL of Disbursements This Page (optional) ▶	1021.75
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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Platinum Business Credit Card

Mailing Address Po Box 15650

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3680

Date of Disbursement

05 / 10 / 2010

Amount of Each Disbursement this Period

3245.57

CREDIT CARD: SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 First St Se

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Food & Beverage Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3773

Date of Disbursement

05 / 09 / 2010

Amount of Each Disbursement this Period

463.01

[MEMO ITEM]

MEMO: FOOD & BEVERAGE EXP-ENSE

C.

Full Name (Last, First, Middle Initial)
Fed Ex

Mailing Address 1555 Rankin Lake Rd

City Gastonia State NC Zip Code 28052-

Purpose of Disbursement
Overnight Delivery Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3776

Date of Disbursement

05 / 09 / 2010

Amount of Each Disbursement this Period

210.38

[MEMO ITEM]

MEMO: OVERNIGHT DELIVERY FEE

SUBTOTAL of Disbursements This Page (optional)

3245.57

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) IContact</p> <p>Mailing Address 2635 Meridian Pkwy</p> <p>City Durham State NC Zip Code 27713-</p> <p>Purpose of Disbursement Email Marketing Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3778 Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 74.00</p> <p>[MEMO ITEM] MEMO: EMAIL MARKETING SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Morehead Inn</p> <p>Mailing Address 1122 E Morehead St</p> <p>City Charlotte State NC Zip Code 28204-</p> <p>Purpose of Disbursement Event Food & Beverage Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3780 Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1149.67</p> <p>[MEMO ITEM] MEMO: EVENT FOOD & BEVERAGE EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 1718 Hwy 70 SE</p> <p>City Hickory State NC Zip Code 28602-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3781 Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 116.88</p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>

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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Public Storage (formerly Shurgard)	Transaction ID: 00715.E3783 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 1 0	
	Mailing Address 1970 Tate Blvd		Amount of Each Disbursement this Period 55.00
	City Hickory State NC Zip Code 28602-		
	Purpose of Disbursement Storage Fee		
	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) ▼	[MEMO ITEM] MEMO: STORAGE FEE
	State: District:		
B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 00715.E3785 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 1 0	
	Mailing Address 145 E Swedesford Rd		Amount of Each Disbursement this Period 121.86
	City Wayne State PA Zip Code 19087-		
	Purpose of Disbursement Office Supplies		
	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) ▼	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	State: District:		
C.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 00715.E3786 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 1 0	
	Mailing Address 231 Government Ave SW		Amount of Each Disbursement this Period 733.60
	City Hickory State NC Zip Code 28602-2955		
	Purpose of Disbursement Postage		
	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) ▼	[MEMO ITEM] MEMO: POSTAGE
	State: District:		

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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Wal-Mart

Mailing Address 2525 Hwy 70 SE

City State Zip Code
Hickory NC 28602-

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3788
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	0

Amount of Each Disbursement this Period

26.53

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Platinum Business Credit Card

Mailing Address Po Box 15650

City State Zip Code
Wilmington DE 19886-

Purpose of Disbursement
Credit Card: See Below
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3681
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Amount of Each Disbursement this Period

2160.61

CREDIT CARD: SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 First St Se

City State Zip Code
Washington DC 20003-

Purpose of Disbursement
Food & Beverage Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3774
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Amount of Each Disbursement this Period

383.05

[MEMO ITEM]
MEMO: FOOD & BEVERAGE EXP-
ENSE

SUBTOTAL of Disbursements This Page (optional)

2160.61

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Fed Ex Mailing Address 1555 Rankin Lake Rd City Gastonia State NC Zip Code 28052- Purpose of Disbursement Overnight Delivery Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3777 Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2010 Amount of Each Disbursement this Period 124.63 [MEMO ITEM] MEMO: OVERNIGHT DELIVERY FEE	
B.	Full Name (Last, First, Middle Initial) IContact Mailing Address 2635 Meridian Pkwy City Durham State NC Zip Code 27713- Purpose of Disbursement Email Marketing Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3779 Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2010 Amount of Each Disbursement this Period 74.00 [MEMO ITEM] MEMO: EMAIL MARKETING SERVICE	
C.	Full Name (Last, First, Middle Initial) Office Max Mailing Address 1718 Hwy 70 SE City Hickory State NC Zip Code 28602- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3782 Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2010 Amount of Each Disbursement this Period 96.12 [MEMO ITEM] MEMO: OFFICE SUPPLIES	

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 36 / 68

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Public Storage (formerly Shurgard)

Mailing Address 1970 Tate Blvd

City State Zip Code
Hickory NC 28602-

Purpose of Disbursement
Storage Fee
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3784
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Amount of Each Disbursement this Period

178.05

[MEMO ITEM]
MEMO: STORAGE FEE

B. Full Name (Last, First, Middle Initial)
US Postal Service

Mailing Address 231 Government Ave SW

City State Zip Code
Hickory NC 28602-2955

Purpose of Disbursement
Postage
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3787
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Amount of Each Disbursement this Period

250.54

[MEMO ITEM]
MEMO: POSTAGE

C. Full Name (Last, First, Middle Initial)
Wal-Mart

Mailing Address 2525 Hwy 70 SE

City State Zip Code
Hickory NC 28602-

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 00715.E3789
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Amount of Each Disbursement this Period

136.58

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Cherryville Golf & Country Club Mailing Address 200 Club Dr City Cherryville State NC Zip Code 28021- Purpose of Disbursement Event Food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3683 Date of Disbursement 05 / 10 / 2010 Amount of Each Disbursement this Period 276.00 EVENT FOOD
B.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3674 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 1764.53 SALARY
C.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Mobile Phone Allowance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3677 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 50.00 MOBILE PHONE ALLOWANCE

SUBTOTAL of Disbursements This Page (optional) ▶	2090.53
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3676 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 168.80 TRAVEL EXPENSE
B.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3675 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 1433.50 SALARY
C.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3672 Date of Disbursement 06 / 01 / 2010 Amount of Each Disbursement this Period 1764.53 SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

3366.83

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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3673 Date of Disbursement 06 / 01 / 2010 Amount of Each Disbursement this Period 461.75 SALARY	
B.	Full Name (Last, First, Middle Initial) Erica Church Mailing Address 512 Collett St City Morganton State NC Zip Code 28655- Purpose of Disbursement Mobile Phone Allowance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3678 Date of Disbursement 06 / 01 / 2010 Amount of Each Disbursement this Period 50.00 MOBILE PHONE ALLOWANCE	
C.	Full Name (Last, First, Middle Initial) Cleveland County Chamber Of Commerce Mailing Address Po Box 879 City Shelby State NC Zip Code 28151- Purpose of Disbursement Membership Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3684 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 240.00 MEMBERSHIP DUES	

SUBTOTAL of Disbursements This Page (optional) ▶	751.75
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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Seth Collie

Transaction ID: 00715.E3745
Date of Disbursement

Mailing Address 1026 Merrywood Dr

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

City State Zip Code
Newton NC 28658-

Amount of Each Disbursement this Period

409.12

Purpose of Disbursement

Category/Type

Salary
Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

SALARY

State: District:

B.

Full Name (Last, First, Middle Initial)
Conservative Victory Fund

Transaction ID: 00502.C10645IK
Date of Disbursement

Mailing Address 104 N Carolina Ave SE

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	0

City State Zip Code
Washington DC 20003-1841

Amount of Each Disbursement this Period

413.20

Purpose of Disbursement
In-kind: Create/Fax Announcem

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

IN KIND: IN-KIND: CREATE-
/FAX ANNOUNCEM

State: District:

C.

Full Name (Last, First, Middle Initial)
CTS Holdings, LLC

Transaction ID: 00715.E3685
Date of Disbursement

Mailing Address 2525 Horizon Lake Dr
Ste #120

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

City State Zip Code
Memphis TN 38133-

Amount of Each Disbursement this Period

9.95

Purpose of Disbursement
Credit Card Processing Fee

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

CREDIT CARD PROCESSING FEE

State: District:

SUBTOTAL of Disbursements This Page (optional)

832.27

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) CTS Holdings, LLC</p> <p>Mailing Address 2525 Horizon Lake Dr Ste #120</p> <p>City Memphis State TN Zip Code 38133-</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3706 Date of Disbursement: 05 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 66.63</p> <p>CREDIT CARD PROCESSING FEE</p>
<p>B. Full Name (Last, First, Middle Initial) CTS Holdings, LLC</p> <p>Mailing Address 2525 Horizon Lake Dr Ste #120</p> <p>City Memphis State TN Zip Code 38133-</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3686 Date of Disbursement: 05 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 253.70</p> <p>CREDIT CARD PROCESSING FEE</p>
<p>C. Full Name (Last, First, Middle Initial) CTS Holdings, LLC</p> <p>Mailing Address 2525 Horizon Lake Dr Ste #120</p> <p>City Memphis State TN Zip Code 38133-</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3687 Date of Disbursement: 06 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 9.95</p> <p>CREDIT CARD PROCESSING FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

330.28

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
CTS Holdings, LLC

Transaction ID: 00715.E3688
Date of Disbursement

Mailing Address 2525 Horizon Lake Dr
Ste #120

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	0

City Memphis State TN Zip Code 38133-

Amount of Each Disbursement this Period

10.00

Purpose of Disbursement
Credit Card Processing Fee

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

CREDIT CARD PROCESSING FEE

State: District:

B.

Full Name (Last, First, Middle Initial)
CTS Holdings, LLC

Transaction ID: 00715.E3689
Date of Disbursement

Mailing Address 2525 Horizon Lake Dr
Ste #120

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

City Memphis State TN Zip Code 38133-

Amount of Each Disbursement this Period

9.95

Purpose of Disbursement
Credit Card Processing Fee

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

CREDIT CARD PROCESSING FEE

State: District:

C.

Full Name (Last, First, Middle Initial)
David L Andrukitus, Inc Printing

Transaction ID: 00715.E3690
Date of Disbursement

Mailing Address 50 E Street SE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City Washington State DC Zip Code 20003-

Amount of Each Disbursement this Period

855.95

Purpose of Disbursement
Printing

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PRINTING

State: District:

SUBTOTAL of Disbursements This Page (optional)

875.90

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) EFTPS (Internal Revenue Service)	Transaction ID: 00715.E3693 Date of Disbursement 05 / 01 / 2010	
	Mailing Address PO Box 105703		
	City Atlanta State GA Zip Code 30348-	Amount of Each Disbursement this Period	19.61
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES
B.	Full Name (Last, First, Middle Initial) EFTPS (Internal Revenue Service)	Transaction ID: 00715.E3694 Date of Disbursement 05 / 01 / 2010	
	Mailing Address PO Box 105703		
	City Atlanta State GA Zip Code 30348-	Amount of Each Disbursement this Period	619.28
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES
C.	Full Name (Last, First, Middle Initial) EFTPS (Internal Revenue Service)	Transaction ID: 00715.E3692 Date of Disbursement 05 / 01 / 2010	
	Mailing Address PO Box 105703		
	City Atlanta State GA Zip Code 30348-	Amount of Each Disbursement this Period	1165.27
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)	1804.16
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EFTPS (Internal Revenue Service)

Mailing Address PO Box 105703

City Atlanta State GA Zip Code 30348-

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00715.E3691

Date of Disbursement

05 / 01 / 2010

Amount of Each Disbursement this Period

6.93

PAYROLL TAXES

B. Full Name (Last, First, Middle Initial)
EFTPS (Internal Revenue Service)

Mailing Address PO Box 105703

City Atlanta State GA Zip Code 30348-

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00715.E3695

Date of Disbursement

06 / 01 / 2010

Amount of Each Disbursement this Period

6.56

PAYROLL TAXES

C. Full Name (Last, First, Middle Initial)
EFTPS (Internal Revenue Service)

Mailing Address PO Box 105703

City Atlanta State GA Zip Code 30348-

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00715.E3696

Date of Disbursement

06 / 01 / 2010

Amount of Each Disbursement this Period

1534.80

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

1548.29

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Employment Security Commission of NC

Mailing Address PO Box 25903

City Raleigh State NC Zip Code 27611-

Purpose of Disbursement
Unemployment Tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3705

Date of Disbursement

05 / 01 / 2010

Amount of Each Disbursement this Period

102.01

UNEMPLOYMENT TAX

B. Full Name (Last, First, Middle Initial)
Employment Security Commission of NC

Mailing Address PO Box 25903

City Raleigh State NC Zip Code 27611-

Purpose of Disbursement
Unemployment Tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3704

Date of Disbursement

05 / 01 / 2010

Amount of Each Disbursement this Period

147.33

UNEMPLOYMENT TAX

C. Full Name (Last, First, Middle Initial)
Employment Security Commission of NC

Mailing Address PO Box 25903

City Raleigh State NC Zip Code 27611-

Purpose of Disbursement
Unemployment Tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3703

Date of Disbursement

06 / 01 / 2010

Amount of Each Disbursement this Period

209.15

UNEMPLOYMENT TAX

SUBTOTAL of Disbursements This Page (optional) ▶

458.49

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) iContribute Mailing Address PO Box 8522 City Falls Church State VA Zip Code 22044- Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3714 Date of Disbursement 05 / 07 / 2010	Amount of Each Disbursement this Period 54.50 CREDIT CARD PROCESSING FEE
B.	Full Name (Last, First, Middle Initial) iContribute Mailing Address PO Box 8522 City Falls Church State VA Zip Code 22044- Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3715 Date of Disbursement 05 / 13 / 2010	Amount of Each Disbursement this Period 44.00 CREDIT CARD PROCESSING FEE
C.	Full Name (Last, First, Middle Initial) iContribute Mailing Address PO Box 8522 City Falls Church State VA Zip Code 22044- Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3716 Date of Disbursement 05 / 21 / 2010	Amount of Each Disbursement this Period 6.25 CREDIT CARD PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional) ▶	104.75
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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
iContribute

Mailing Address PO Box 8522

City Falls Church State VA Zip Code 22044-

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3717
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

Amount of Each Disbursement this Period

4.00

CREDIT CARD PROCESSING FEE

B.

Full Name (Last, First, Middle Initial)
Majority Committee PAC MCPAC

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389-0134

Purpose of Disbursement
In-kind: Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.C10790IK
Date of Disbursement

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

Amount of Each Disbursement this Period

208.95

IN KIND: IN-KIND: SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Ryan Minto

Mailing Address 214 S Fraternity Ct

City Raleigh State NC Zip Code 27606-2025

Purpose of Disbursement
Mobile Phone Allowance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3743
Date of Disbursement

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

Amount of Each Disbursement this Period

129.51

MOBILE PHONE ALLOWANCE

SUBTOTAL of Disbursements This Page (optional)

342.46

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ryan Minto	Transaction ID: 00715.E3744 Date of Disbursement 05 / 01 / 2010
	Mailing Address 214 S Fraternity Ct	Amount of Each Disbursement this Period 96.00
	City Raleigh State NC Zip Code 27606-2025	
	Purpose of Disbursement Health Insurance Allowance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE ALLOWANCE
B.	Full Name (Last, First, Middle Initial) Ryan Minto	Transaction ID: 00715.E3737 Date of Disbursement 05 / 01 / 2010
	Mailing Address 214 S Fraternity Ct	Amount of Each Disbursement this Period 2323.60
	City Raleigh State NC Zip Code 27606-2025	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY
C.	Full Name (Last, First, Middle Initial) Ryan Minto	Transaction ID: 00715.E3742 Date of Disbursement 05 / 10 / 2010
	Mailing Address 214 S Fraternity Ct	Amount of Each Disbursement this Period 535.00
	City Raleigh State NC Zip Code 27606-2025	
	Purpose of Disbursement Travel Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2954.60

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ryan Minto

Transaction ID: 00715.E3741
Date of Disbursement

Mailing Address 214 S Fraternity Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

City Raleigh State NC Zip Code 27606-2025

Amount of Each Disbursement this Period

80.26

Purpose of Disbursement
Travel Expense

Category/ Type

Candidate Name

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

TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)
Ryan Minto

Transaction ID: 00715.E3740
Date of Disbursement

Mailing Address 214 S Fraternity Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

City Raleigh State NC Zip Code 27606-2025

Amount of Each Disbursement this Period

184.00

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

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

SALARY

C.

Full Name (Last, First, Middle Initial)
Ryan Minto

Transaction ID: 00715.E3739
Date of Disbursement

Mailing Address 214 S Fraternity Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

City Raleigh State NC Zip Code 27606-2025

Amount of Each Disbursement this Period

1847.00

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

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

SALARY

SUBTOTAL of Disbursements This Page (optional)

2111.26

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ryan Minto

Transaction ID: 00715.E3738
Date of Disbursement

Mailing Address 214 S Fraternity Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

City Raleigh State NC Zip Code 27606-2025

Amount of Each Disbursement this Period

2323.60

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

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

SALARY

State: District:

B.

Full Name (Last, First, Middle Initial)
Mooreville-So.Iredell Chamber of Commer

Transaction ID: 00715.E3726
Date of Disbursement

Mailing Address PO Box 628

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City Mooreville State NC Zip Code 28115-

Amount of Each Disbursement this Period

299.00

Purpose of Disbursement
Membership Dues

Category/ Type

Candidate Name

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

MEMBERSHIP DUES

State: District:

C.

Full Name (Last, First, Middle Initial)
NC Dept. of Revenue

Transaction ID: 00715.E3698
Date of Disbursement

Mailing Address PO Box 25000

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

City Raleigh State NC Zip Code 27640-0615

Amount of Each Disbursement this Period

283.00

Purpose of Disbursement
Payroll Taxes

Category/ Type

Candidate Name

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

PAYROLL TAXES

State: District:

SUBTOTAL of Disbursements This Page (optional)

2905.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) NC Dept. of Revenue</p> <p>Mailing Address PO Box 25000</p> <p>City Raleigh State NC Zip Code 27640-0615</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3699 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 78.00</p> <p>PAYROLL TAXES</p>
<p>B. Full Name (Last, First, Middle Initial) NC Dept. of Revenue</p> <p>Mailing Address PO Box 25000</p> <p>City Raleigh State NC Zip Code 27640-0615</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3697 Date of Disbursement 06 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 246.00</p> <p>PAYROLL TAXES</p>
<p>C. Full Name (Last, First, Middle Initial) Bill Oorbeek</p> <p>Mailing Address 5903 Woodfield Estates Dr</p> <p>City Alexandria State VA Zip Code 22310-</p> <p>Purpose of Disbursement Reimbursement: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3660 Date of Disbursement 06 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 4220.00</p> <p>REIMBURSEMENT: SEE BELOW</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4544.00

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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Washington Nationals</p> <p>Mailing Address 1500 S Capitol SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement Event Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3790 Date of Disbursement 06 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 4220.00</p> <p>[MEMO ITEM] MEMO: EVENT TICKETS</p>
<p>B. Full Name (Last, First, Middle Initial) William Pitman</p> <p>Mailing Address LRU Box 7813</p> <p>City Hickory State NC Zip Code 28603-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3767 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 757.54</p> <p>SALARY</p>
<p>C. Full Name (Last, First, Middle Initial) William Pitman</p> <p>Mailing Address LRU Box 7813</p> <p>City Hickory State NC Zip Code 28603-</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3768 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 152.60</p> <p>TRAVEL EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

910.14

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) William Pitman</p> <p>Mailing Address LRU Box 7813</p> <p>City Hickory State NC Zip Code 28603-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3771</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="461.75"/></p> <p>SALARY</p>
<p>B. Full Name (Last, First, Middle Initial) William Pitman</p> <p>Mailing Address LRU Box 7813</p> <p>City Hickory State NC Zip Code 28603-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3770</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="184.70"/></p> <p>SALARY</p>
<p>C. Full Name (Last, First, Middle Initial) William Pitman</p> <p>Mailing Address LRU Box 7813</p> <p>City Hickory State NC Zip Code 28603-</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3769</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.32"/></p> <p>TRAVEL EXPENSE</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="658.77"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
The Armory Bldg/Prism Property Mgmt

Mailing Address Po Box 729

City State Zip Code
Hickory NC 28603-

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3728

Date of Disbursement

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

Amount of Each Disbursement this Period

850.00

OFFICE RENT

B. Full Name (Last, First, Middle Initial)
The Armory Bldg/Prism Property Mgmt

Mailing Address Po Box 729

City State Zip Code
Hickory NC 28603-

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3727

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	0

Amount of Each Disbursement this Period

850.00

OFFICE RENT

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

Mailing Address PO Box 2489

City State Zip Code
Omaha NE 68103-2489

Purpose of Disbursement
Teleconference Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3729

Date of Disbursement

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

Amount of Each Disbursement this Period

3.79

TELECONFERENCE EXPENSE

SUBTOTAL of Disbursements This Page (optional)

1703.79

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Qwest <hr/> Mailing Address PO Box 2489 <hr/> City Omaha State NE Zip Code 68103-2489 <hr/> Purpose of Disbursement Teleconference Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3730 Date of Disbursement 06 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 40.58 <hr/> TELECONFERENCE EXPENSE
B.	Full Name (Last, First, Middle Initial) Catherine Rains <hr/> Mailing Address 317 Oakwood Ln <hr/> City Devon State PA Zip Code 19333- <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3668 Date of Disbursement 05 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 1635.00 <hr/> SALARY
C.	Full Name (Last, First, Middle Initial) Catherine Rains <hr/> Mailing Address 317 Oakwood Ln <hr/> City Devon State PA Zip Code 19333- <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00715.E3669 Date of Disbursement 06 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 2135.00 <hr/> SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

3810.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rutherford County Chamber Of Commerce

Mailing Address 162 N Main St

City Rutherfordton State NC Zip Code 28139-

Purpose of Disbursement
Membership Dues

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3736
Date of Disbursement

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

Amount of Each Disbursement this Period

115.00

MEMBERSHIP DUES

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

Mailing Address PO Box 219100

City Kansas City State MO Zip Code 64121-9100

Purpose of Disbursement
Telephone Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3748
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

Amount of Each Disbursement this Period

64.65

TELEPHONE EXPENSE

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

Mailing Address 369 Deer Run Dr

City Conover State NC Zip Code 28613-

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3670
Date of Disbursement

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

Amount of Each Disbursement this Period

547.72

SALARY

SUBTOTAL of Disbursements This Page (optional)

727.37

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Christan Stapleton

Mailing Address 369 Deer Run Dr

City Conover State NC Zip Code 28613-

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00715.E3671

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

Amount of Each Disbursement this Period

110.82

SALARY

B.

Full Name (Last, First, Middle Initial)
Tel Opinion Research

Mailing Address 19 North 6th Street

City Warrenton State VA Zip Code 20186-

Purpose of Disbursement

Survey

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00715.E3749

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	0

Amount of Each Disbursement this Period

6800.00

SURVEY

C.

Full Name (Last, First, Middle Initial)
The Oorbeek Group

Mailing Address 5903 Woodfield Estates Dr

City Alexandria State VA Zip Code 22310-

Purpose of Disbursement

Reimbursement: See Below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00715.E3752

Date of Disbursement

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

Amount of Each Disbursement this Period

4367.30

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

11278.12

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Sonoma Restaurant

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20500-

Purpose of Disbursement
Event Food & Beverage Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3753

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: EVENT FOOD & BEVERAGE EXPENSE

B.

Full Name (Last, First, Middle Initial)
W Millar & Co Catering

Mailing Address 1335 14th St NW

City Washington State DC Zip Code 20004-

Purpose of Disbursement
Food & Beverage Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3754

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: FOOD & BEVERAGE EXPENSE

C.

Full Name (Last, First, Middle Initial)
The Oorbeek Group

Mailing Address 5903 Woodfield Estates Dr

City Alexandria State VA Zip Code 22310-

Purpose of Disbursement
Fundraising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FUNDRAISING

SUBTOTAL of Disbursements This Page (optional) ▶

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 / 68

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The Oorbeek Group <hr/> Mailing Address 5903 Woodfield Estates Dr <hr/> City Alexandria State VA Zip Code 22310- <hr/> Purpose of Disbursement Fundraising Candidate Name Category/ Type <hr/> 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:	Transaction ID: 00715.E3755 Date of Disbursement 06 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> FUNDRAISING
B.	Full Name (Last, First, Middle Initial) The Stewart Group <hr/> Mailing Address Po Box 26508 <hr/> City Raleigh State NC Zip Code 27611- <hr/> Purpose of Disbursement Planning & Development Fee Candidate Name Category/ Type <hr/> 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:	Transaction ID: 00715.E3756 Date of Disbursement 05 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 6000.00 <hr/> PLANNING & DEVELOPMENT FEE
C.	Full Name (Last, First, Middle Initial) The Stewart Group <hr/> Mailing Address Po Box 26508 <hr/> City Raleigh State NC Zip Code 27611- <hr/> Purpose of Disbursement Mailers Candidate Name Category/ Type <hr/> 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:	Transaction ID: 00715.E3757 Date of Disbursement 05 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 42926.36 <hr/> MAILERS

SUBTOTAL of Disbursements This Page (optional) ▶

51426.36

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Stewart Group

Transaction ID: 00715.E3758
Date of Disbursement

Mailing Address Po Box 26508

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

City Raleigh State NC Zip Code 27611-

Amount of Each Disbursement this Period

2917.50

Purpose of Disbursement

Category/Type

Autocalls
Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

AUTOCALLS

State: District:

B.

Full Name (Last, First, Middle Initial)
The Stewart Group

Transaction ID: 00715.E3760
Date of Disbursement

Mailing Address Po Box 26508

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City Raleigh State NC Zip Code 27611-

Amount of Each Disbursement this Period

270.63

Purpose of Disbursement

Category/Type

Campaign Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

CAMPAIGN SUPPLIES

State: District:

C.

Full Name (Last, First, Middle Initial)
The Stewart Group

Transaction ID: 00715.E3759
Date of Disbursement

Mailing Address Po Box 26508

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City Raleigh State NC Zip Code 27611-

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Planning & Development Fee

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PLANNING & DEVELOPMENT FEE

State: District:

SUBTOTAL of Disbursements This Page (optional)

6188.13

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
US Postal Service

Mailing Address 231 Government Ave SW

City State Zip Code
Hickory NC 28602-2955

Purpose of Disbursement
BRM Permit Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3761
Date of Disbursement

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

Amount of Each Disbursement this Period

185.00

BRM PERMIT FEE

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address Po Box 105378

City State Zip Code
Atlanta GA 30348-

Purpose of Disbursement
Mobile Phone Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3762
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	0

Amount of Each Disbursement this Period

199.49

MOBILE PHONE EXPENSE

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address Po Box 105378

City State Zip Code
Atlanta GA 30348-

Purpose of Disbursement
Mobile Phone Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3763
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

Amount of Each Disbursement this Period

215.98

MOBILE PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ►

600.47

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address Po Box 105378</p> <p>City Atlanta State GA Zip Code 30348-</p> <p>Purpose of Disbursement Mobile Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3764 Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 204.85</p> <p>MOBILE PHONE EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Andrew Vickers</p> <p>Mailing Address 1083 Bethlehem School Rd</p> <p>City Hickory State NC Zip Code 28601-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3656 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 326.92</p> <p>SALARY</p>
<p>C. Full Name (Last, First, Middle Initial) Lauren Vickers</p> <p>Mailing Address 1083 Bethlehem School Rd</p> <p>City Hickory State NC Zip Code 28601-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00715.E3724 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 310.30</p> <p>SALARY</p>

SUBTOTAL of Disbursements This Page (optional) ▶

842.07

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Warren & Associates

Transaction ID: 00715.E3765
Date of Disbursement

Mailing Address PO Box 1871

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

City Gastonia State NC Zip Code 28052-

Amount of Each Disbursement this Period

65.44

Purpose of Disbursement
Mobile Phone Expense

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

MOBILE PHONE EXPENSE

State: District:

B.

Full Name (Last, First, Middle Initial)
Warren & Associates

Transaction ID: 00715.E3766
Date of Disbursement

Mailing Address PO Box 1871

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City Gastonia State NC Zip Code 28052-

Amount of Each Disbursement this Period

127.39

Purpose of Disbursement
Mobile Phone Expense

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

MOBILE PHONE EXPENSE

State: District:

SUBTOTAL of Disbursements This Page (optional)

192.83

TOTAL This Period (last page this line number only)

130892.22

**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 / 68

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
First National Bank

Transaction ID: 00715.E3707
Date of Disbursement

Mailing Address PO Box 168

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	0

City State Zip Code
Shelby NC 28151-

Amount of Each Disbursement this Period

40000.00

Purpose of Disbursement
Repayment of Other Loan Loan Principal P

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
First National Bank

Transaction ID: 00715.E3708
Date of Disbursement

Mailing Address PO Box 168

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	0

City State Zip Code
Shelby NC 28151-

Amount of Each Disbursement this Period

20000.00

Purpose of Disbursement
Repayment of Other Loan Loan Principal P

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

60000.00

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

60000.00

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)

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

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NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Friends Of Roy Blunt

Mailing Address PO Box 50100
Ste 1011

City Springfield State MO Zip Code 65805-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3791
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Gresham Barrett for Governor

Mailing Address PO Box 287

City Columbia State SC Zip Code 29202-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00715.E3711
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 67 / 68
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

Transaction ID: LS80714.C8184

LOAN SOURCE Full Name (Last, First, Middle Initial) Patrick Timothy McHenry	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2008
Mailing Address 806B Requa Rd	
City Cherryville State NC ZIP Code 28021-	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
175000.00	115500.00	59500.00

TERMS

Date Incurred MM DD YY YY 06 30 2008	Date Due ONDEMAND	Interest Rate 600.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	59500.00
TOTALS This Period (last page in this line only)	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

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

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FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
MCHENRY FOR CONGRESS

Transaction ID: LS51015.C3021

LOAN SOURCE Full Name (Last, First, Middle Initial) First National Bank	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ R-2004
Mailing Address PO Box 168	
City Shelby State NC ZIP Code 28151-	

Original Amount of Loan 100500.00	Cumulative Payment To Date 70000.00	Balance Outstanding at Close of This Period 30500.00
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TERMS

Date Incurred MM DD YY YY 07 19 2004	Date Due 20110407	Interest Rate 725.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="30500.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="90000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.